SECTION 904 (2)(c) Part 1 TOTAL CMHSP COSTS BY SERVICE CATEGORY FY 2019

Overview

The data that are presented in this section were provided by CMHSPs as required by the FY 2019 MDHHS/CMHSP contract. Cost data were collected for the reporting period October 1, 2018 to September 30, 2019 and submitted to MDHHS by March 1, 2020. The data in this section represent the total statewide CMHSP costs for each of the three consumer populations (Adults with Mental Illness, Children with an Emotional Disturbance, and Persons with Developmental Disability) by service category. All Department approved services are included.

Definitions for terms found in this section are presented in Section 404(4).

Adults with Mental Illness

SUB-ELEMENT COST REPORT: Fiscal Year 2019

Statewide	Summary
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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Local Psychiatric Hospital/IMD PT68 bundled per diem	0100		PT68	Days	8,207	94,198	\$71,271,891	\$8,684	\$757	11
Local Psychiatric Hospital/IMD PT68bundled per diem	0100		PT68	Days	1,768	23,827	\$6,133,002	\$3,469	\$257	13
Local Psychiatric Hospital/IMD PT68physician costs excluded	0114, 0124, 0134, 0154		PT68	Days	1,065	11,312	\$6,202,762	\$5,824	\$548	11
Local Psychiatric Hospital/IMD PT68physician costs excluded	0114, 0124, 0134, 0154		PT68	Days	208	2,811	\$124,498	\$599	\$44	14
Local Psychiatric Hospital - Acute Community PT73bundled per diem	0100		PT73	Days	9,914	93,734	\$74,761,425	\$7,541	\$798	9
Local Psychiatric Hospital - Acute Community PT73bundled per diem	0100		PT73	Days	972	11,318	\$2,265,857	\$2,331	\$200	12
Local Psychiatric Hospital - Acute Community PT73physician costs excluded	0114, 0124, 0134, 0154		PT73	Days	2,052	20,304	\$11,665,957	\$5,685	\$575	10
Local Psychiatric Hospital - Acute Community PT73physician costs excluded	0114, 0124, 0134, 0154		PT73	Days	301	4,156	\$351,116	\$1,166	\$84	14
Local Psychiatric Hospital/IMD			PT68	Amount	0	0	\$20,650,728	\$0	\$0	0
Local Psychiatric Hospital/Acute Community			PT73	Days	0	0	\$12,583,748	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of treatments	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			Hour	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of visits	0	0	\$0	\$0	\$0	0

Adults with Mental Illness

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Additional Codes-ECT Facility Charge Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services Outpatient Partial Hospitalization Outpatient Partial Hospitalization	0762 0901 0900, 0902-0904, 0911, 0914-0919 0912 0913 0925			Days Days # of tests # of visits	0 25 0	0 210 0	\$0 \$168,915 \$0	\$0 \$6,757 \$0	\$0 \$804 \$0	8
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services Outpatient Partial Hospitalization Outpatient Partial Hospitalization	0900, 0902-0904, 0911, 0914-0919 0912 0913 0925			# of tests # of visits	0					
Psychiatric/Psychological Treatments/Services Outpatient Partial Hospitalization Outpatient Partial Hospitalization	0911, 0914-0919 0912 0913 0925			# of visits		0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0913 0925				1.803					
·	0925				-,	14,561	\$3,688,863	\$2,046	\$253	8
Inpatient Hospital Ancillary Services - Other Diagnosis				Minutes	19	98	\$43,049	\$2,266	\$439	5
Services				Minutes	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		First 30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		15 Minutes	19	224	\$203,961	\$10,735	\$911	12
Drug Screen		80305		Encounter	84	406	\$8,871	\$106	\$22	5
Drug Screen		80306		Encounter	0	0	\$0	\$0	\$0	0
Drug Screen		80307		Encounter	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Encounter	100	219	\$11,281	\$113	\$52	2
Substance Abuse - Interactive Complexity - Add On Code		90785	HF	Encounter	0	0	\$0	\$0	\$0	0
Assessment		90791		Encounter	12,378	13,568	\$5,386,339	\$435	\$397	1
Substance Use: Assessment		90791	HF	Encounter	15	15	\$4,589	\$306	\$306	1
Assessment		90792		30 Minutes	20,537	21,325	\$6,986,009	\$340	\$328	1
Substance Use: Assessment		90792	HF	30 Minutes	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		45 Minutes	21,551	51,535	\$4,174,669	\$194	\$81	2
	0900, 0906, 0914, 0915, 0916, 0919	90832	HF	45 Minutes	931	2,258	\$233,416	\$251	\$103	2
Assessment		90833		45 Minutes	68	108	\$7,235	\$106	\$67	2
Mental Health: Outpatient Care		90834		60 Minutes	29,282	108,098	\$15,513,932	\$530	\$144	4
	0900, 0906, 0914, 0915, 0916, 0919	90834	HF	60 Minutes	1,382	4,795	\$669,992	\$485	\$140	3
Assessment		90836		60 Minutes	99	147	\$13,247	\$134	\$90	1
Mental Health: Outpatient Care		90837		First 30-74 Min.	30,704	129,622	\$24,109,903	\$785	\$186	4
Substance Use Disorder: Outpatient Care		90837	HF	Each Additional 30 Minutes	1,313	5,381	\$963,251	\$734	\$179	4
Assessment		90838		Encounter	25	49	\$15,163	\$607	\$309	2
Psychotherapy for Crisis First 60 Minutes		90839		Encounter	1,018	1,664	\$233,424	\$229	\$140	2
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter	73	152	\$12,806	\$175	\$84	2
Therapy-Family Therapy		90846		Encounter	43	77	\$11,554	\$269	\$150	2

Adults with Mental Illness

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846	HF	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	336	906	\$141,048	\$420	\$156	3
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847	HF	Encounter	25	88	\$11,662	\$466	\$133	4
Therapy-Family Therapy		90849		Encounter	1	8	\$979	\$979	\$122	8
Therapy-Family Therapy		90849	HS	Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849	HF		0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	5,584	59,349	\$9,701,093	\$1,737	\$163	11
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853	HF	Encounter	919	8,576	\$1,026,667	\$1,117	\$120	9
Additional Codes-ECT Physician		90870		Encounter	118	1,147	\$171,884	\$1,457	\$150	10
Additional Codes-ECT Physician	0901	90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	145	149	\$15,525	\$107	\$104	1
Speech & Language Therapy		92507		Encounter	4	19	\$2,398	\$600	\$126	5
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92523		First Hour	2	2	\$213	\$106	\$106	1
Speech & Language Therapy		92524		Each Additional 30 Minutes	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92526		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92607		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92608		First Hour	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92609		Each Additional 15 Minutes	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Assessments - Testing(Note: code retired 12/31/18)		96101		Hour	61	185	\$62,132	\$1,019	\$336	3
Assessments - Testing(Note: code retired 12/31/18)		96102		Encounter	0	0	\$0	\$0	\$0	0
Assessments - Testing(Note: code retired 12/31/18)		96103		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		First Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Each Additional 30 Minutes	2	7	\$875	\$438	\$125	4
Assessments - Other(Note: code retired 12/31/18)	·	96111		Per Hour	5	5	\$928	\$186	\$186	1
Assessments - Testing		96112		Per Hour	0	0	\$0	\$0	\$0	0
Assessments - Testing		96113		Hour	0	0	\$0	\$0	\$0	0

Adults with Mental Illness

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Statewide Summary				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Neurobehavioral Status Exam		96116		Per Hour	34	38	\$868	\$26	\$23	1
Assessments - Testing(Note: code retired 12/31/18)		96118		Hour	3	9	\$80	\$27	\$9	3
Assessments - Testing(Note: code retired 12/31/18)		96119		Each Additional Hour	0	0	\$0	\$0	\$0	0
Assessments - Testing(Note: code retired 12/31/18)		96120		First Hour	0	0	\$0	\$0	\$0	0
Assessments - Testing		96121		First Hour	9	9	\$86	\$10	\$10	1
Assessments-Other		96127		Each Additional Hour	0	0	\$0	\$0	\$0	0
Assessments - Testing		96130		Each Additional Hour	160	190	\$53,678	\$335	\$283	1
Assessments - Testing		96131		First Hour	83	164	\$42,645	\$514	\$260	2
Assessments - Testing		96132		Each Additional Hour	4	5	\$1,307	\$327	\$261	1
Assessments - Testing		96133		First 30 Minutes	0	0	\$0	\$0	\$0	0
Assessments - Testing		96136		Each Additional 30 Minutes	86	88	\$10,672	\$124	\$121	1
Assessments - Testing		96137		Each Additional 30 Minutes	77	358	\$35,946	\$467	\$100	5
Assessments - Testing		96138		Encounter	0	0	\$0	\$0	\$0	0
Assessments - Testing		96139		15 Minutes	0	0	\$0	\$0	\$0	0
Assessments - Testing		96146		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		15 Minutes	12,350	84,793	\$7,755,234	\$628	\$91	7
Occupational or Physical Therapy		97110		15 Minutes	50	525	\$10,749	\$215	\$20	11
Occupational or Physical Therapy		97112		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		15 Minutes	0	0	\$0	\$0	\$0	0
Physical Therapy		97161		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97162		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97163		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97164		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97165		Encounter	9	9	\$2,385	\$265	\$265	1
Occupational Therapy		97166		15 Minutes	13	14	\$4,077	\$314	\$291	1
Occupational Therapy		97167		15 Minutes	42	45	\$9,082	\$216	\$202	1
Occupational Therapy		97168		15 Minutes	4	4	\$480	\$120	\$120	1
Occupational or Physical Therapy		97530		15 Minutes	70	2,433	\$74,550	\$1,065	\$31	35
Occupational or Physical Therapy		97533		15 Minutes	1	8	\$1,145	\$1,145	\$143	8

Adults with Mental Illness

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Statewide Summary				TImis						
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational or Physical Therapy		97535		15 Minutes	1	16	\$2,262	\$2,262	\$141	16
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	1	3	\$164	\$164	\$55	3
Occupational or Physical Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97763		30 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services		97802		Encounter	119	450	\$54,570	\$459	\$121	4
Assessment or Health Services		97803		Encounter	129	553	\$40,450	\$314	\$73	4
Health Services		97804		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Encounter	119	120	\$11,985	\$101	\$100	1
Substance Use Disorder: New Patient Evaluation and Management		99201	HF	Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Encounter	547	558	\$75,594	\$138	\$135	1
Substance Use Disorder: New Patient Evaluation and Management		99202	HF	Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Encounter	516	642	\$124,980	\$242	\$195	1
Substance Use Disorder: New Patient Evaluation and Management		99203	HF	Encounter	4	4	\$1,412	\$353	\$353	1
New Patient Evaluation and Management		99204		Encounter	713	715	\$203,093	\$285	\$284	1
Substance Use Disorder: New Patient Evaluation and Management		99204	HF	Encounter	3	3	\$712	\$237	\$237	1
New Patient Evaluation and Management		99205		Encounter	1,005	1,006	\$348,880	\$347	\$347	1
Substance Use Disorder: New Patient Evaluation and Management		99205	HF	Encounter	5	5	\$1,484	\$297	\$297	1
Established Patient Evaluation and Management		99211		Encounter	2,951	6,579	\$724,588	\$246	\$110	2
Substance Use Disorder: Established Patient Evaluation and Management		99211	HF	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	8,411	13,981	\$1,248,079	\$148	\$89	2
Substance Use Disorder: Established Patient Evaluation and Management		99212	HF	Encounter	45	115	\$11,681	\$260	\$102	3
Established Patient Evaluation and Management		99213		Encounter	54,713	184,791	\$23,729,470	\$434	\$128	3
Sustance Abuse: Established Patient Evaluation and Management		99213	HF	Encounter	61	110	\$14,234	\$233	\$129	2
Established Patient Evaluation and Management		99214		Encounter	25,883	62,620	\$14,512,090	\$561	\$232	2

Adults with Mental Illness

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Statewide Summary				T.Tie						
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Use Disorder: Established Patient Evaluation and Management		99214	HF	30 Minutes	18	25	\$4,066	\$226	\$163	1
Established Patient Evaluation and Management		99215		50 Minutes	4,339	6,960	\$1,683,147	\$388	\$242	2
Substance Use Disorder: Established Patient Evaluation and Management		99215	HF	70 Minutes	23	23	\$10,181	\$443	\$443	1
Additional Codes-Physician Services		99221		15 Minutes	430	474	\$37,305	\$87	\$79	1
Additional Codes-Physician Services		99222		25 minutes	331	355	\$35,967	\$109	\$101	1
Additional Codes-Physician Services		99223		35 Minutes	231	256	\$27,779	\$120	\$109	1
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		25 minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		35 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		<= 30 Minutes	1,015	5,472	\$375,108	\$370	\$69	5
Additional Codes-Physician Services		99232		> 30 Minutes	922	3,995	\$307,052	\$333	\$77	4
Additional Codes-Physician Services		99233		15 Minutes	390	1,280	\$104,295	\$267	\$81	3
Additional Codes-Physician Services		99238		30 Minutes	281	296	\$22,830	\$81	\$77	1
Additional Codes-Physician Services		99239		40 Minutes	293	320	\$27,999	\$96	\$87	1
Substance Use Disorder: Physician Consultations		99241	HF	60 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99242	HF	80 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99243	HF	20 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99244	HF	40 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99245	HF	55 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99251	HF	80 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99252	HF	110 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99253	HF	25 minutes	2	2	\$1,362	\$681	\$681	1
Substance Use Disorder: Physician Consultations		99254	HF	35 Minutes	1	1	\$991	\$991	\$991	1
Substance Use Disorder: Physician Consultations		99255	HF	45 Minutes	0	0	\$0	\$0	\$0	0
Nursing Facility Services evaluation and management		99304		10 Minutes	2	2	\$366	\$183	\$183	1
Nursing Facility Services evaluation and management		99305		15 Minutes	39	42	\$3,224	\$83	\$77	1
Nursing Facility Services evaluation and management		99306		25 minutes	33	34	\$1,298	\$39	\$38	1
Nursing Facility Services evaluation and management		99307		35 Minutes	34	48	\$317	\$9	\$7	1
Nursing Facility Services evaluation and management		99308		Encounter	203	406	\$8,994	\$44	\$22	2
Nursing Facility Services evaluation and management		99309		Encounter	355	880	\$28,371	\$80	\$32	2
Nursing Facility Services evaluation and management		99310		Encounter	163	391	\$22,925	\$141	\$59	2
Assessment		99324		Encounter	6	7	\$1,081	\$180	\$154	1
Assessment		99325		Encounter	0	0	\$0	\$0	\$0	0
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Assessment	99326		Measure						
Assessment			Encounter	0	0	\$0	\$0	\$0	0
Assessment	99327		Encounter	2	2	\$329	\$165	\$165	1
Assessment	99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99334		Encounter	26	50	\$13,446	\$517	\$269	2
Assessment	99335		Encounter	77	217	\$19,040	\$247	\$88	3
Assessment	99336		Encounter	33	67	\$3,249	\$98	\$48	2
Assessment	99337		Encounter	3	16	\$0	\$0	\$0	5
Assessment	99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99347		Encounter	6	16	\$16,128	\$2,688	\$1,008	3
Assessment	99348		Encounter	16	45	\$4,524	\$283	\$101	3
Assessment	99349		15 Minutes	8	14	\$3,195	\$399	\$228	2
Assessment	99350		Per mile	0	0	\$0	\$0	\$0	0
Medication Administration	99506		Per mile	26	129	\$5,914	\$227	\$46	5
Medication Management	99605		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation	A0080		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation	A0090		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation	A0100		Per one-way trip	119	142	\$98,137	\$825	\$691	1
Substance Use Disorder: Transportation	A0100	HF	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation	A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Transportation	A0110	HF	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation	A0120			5	34	\$316	\$63	\$9	7
Transportation	A0130		Per Mile	0	0	\$0	\$0	\$0	0
Transportation	A0140		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Transportation	A0170		Items	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation	A0425		Encounter	123	5,239	\$27,204	\$221	\$5	43
Additional Codes-Transportation	A0427		Encounter Session at least 45 min	111	118	\$39,045	\$352	\$331	1
Enhanced Medical Equipment-Supplies	E1399		15 Minutes	1	2	\$279	\$279	\$139	2
Family Training/Support EBP only	G0177		Encounter	94	614	\$219,376	\$2,334	\$357	7
Substance Use Disorder: Recovery Support Services	G0409		Encounter	0	0	\$0	\$0	\$0	0

Adults with Mental Illness

SUB-ELEMENT COST REPORT: Fiscal Year 2019

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Occupational Therapy		G0515		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Individual Assessment		H0001		15 Minutes	2,029	2,175	\$501,819	\$247	\$231	1
Assessment		H0002		Encounter	13,468	16,085	\$3,519,723	\$261	\$219	1
Substance Use Disorder: Laboratory		H0003		Encounter	1	1	\$223	\$223	\$223	1
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Days	96	2,522	\$334,487	\$3,484	\$133	26
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Days	38	470	\$28,278	\$744	\$60	12
Substance Use Disorder: Case Management		H0006		Days	19	25	\$4,872	\$256	\$195	1
Substance Use Disorder: Sub-Acute Detoxification	1002	H0010		Days	28	111	\$66,207	\$2,365	\$596	4
Substance Use Disorder: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Outpatient Care	0906	H0015		Days	242	3,900	\$618,928	\$2,558	\$159	16
Crisis Residential Services		H0018		Encounter	4,944	36,986	\$15,029,492	\$3,040	\$406	7
Substance Use Disorder: Residential	1002	H0018	HF	Encounter	36	374	\$59,527	\$1,654	\$159	10
Substance Use Disorder: Residential	1002	H0019	HF	Encounter	32	1,897	\$223,857	\$6,996	\$118	59
Substance Use Disorder: Methadone		H0020		Encounter	64	15,217	\$241,506	\$3,774	\$16	238
Substance Use Disorder: Early Intervention		H0022		Face to Face Contact	88	472	\$26,717	\$304	\$57	5
Peer Directed and Operated Support Services		H0023		Encounter	435	22,338	\$2,127,861	\$4,892	\$95	51
Substance Use Disorder: Recovery Support Services		H0023	HF	Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025			4	11	\$1,067	\$267	\$97	3
Assessment		H0031		Encounter	60,696	71,937	\$19,639,859	\$324	\$273	1
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Direct Observation Encounter	41	43	\$13,213	\$322	\$307	1
Treatment Planning		H0032		15 Minutes	44,073	77,900	\$13,228,037	\$300	\$170	2
Monitoring of Treatment - Clinician		H0032	TS	15 Minutes	3,794	6,465	\$976,447	\$257	\$151	2
Substance Use Disorder: Pharmalogical Support - Suboxano	e	H0033		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 minutes	445	2,480	\$463,528	\$1,042	\$187	6
Home Based Services		H0036		15 Minutes	713	63,611	\$4,562,709	\$6,399	\$72	89
Home Based Services		H0036	ST	15 Minutes	6	153	\$17,345	\$2,891	\$113	26
Peer Directed and Operated Support Services		H0038			17,413	871,102	\$16,000,772	\$919	\$18	50
Peer Directed and Operated Support Services		H0038	TJ	15 Minutes	14	539	\$19,124	\$1,366	\$35	39
Substance Use Disorder: Recovery Support Services		H0038	HF	15 Minutes	487	14,484	\$238,181	\$489	\$16	30
Peer Directed and Operated Support Services		NA		Per Diem	506	7,567	\$2,462,682	\$4,867	\$325	15
Assertive Community Treatment (ACT)		H0039		Per Diem	4,742	801,581	\$53,745,705	\$11,334	\$67	169

Adults with Mental Illness

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Statewide Summary			TT-1						
Service Category	Revenue Code HCPC	Code Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assertive Community Treatment (ACT)	H0039	TG	Per Diem	718	49,090	\$2,530,825	\$3,525	\$52	68
Community Living Supports in Independent living/own home	H0043		Per Diem	2,016	239,214	\$21,708,321	\$10,768	\$91	119
Community Living Supports in Independent living/own home	H0043	TF	Per Diem	132	26,384	\$3,246,662	\$24,596	\$123	200
Community Living Supports in Independent living/own home	H0043	TG	Per Diem	105	18,419	\$3,847,436	\$36,642	\$209	175
Community Living Supports in Independent living/own home	H0043	TT	Days	17	3,834	\$440,123	\$25,890	\$115	226
Community Living Supports in Independent living/own home	H0043	TF/TT	Encounter	34	6,040	\$882,815	\$25,965	\$146	178
Community Living Supports in Independent living/own home	H0043	TG/TT	Encounter	341	98,469	\$15,410,960	\$45,193	\$157	289
Respite	H0045		15 Minutes	26	700	\$102,585	\$3,946	\$147	27
Peer Directed and Operated Support Services	H0046		Encounter	9	63	\$19,536	\$2,171	\$310	7
Substance Use Disorder: Laboratory	H0048		Encounter	1	1	\$39	\$39	\$39	1
	000, 0906, 0914, H0050 015, 0916, 0919		15 minutes	207	3,253	\$309,696	\$1,496	\$95	16
Behavior Treatment Plan Review	H2000		15 Minutes	286	795	\$108,877	\$381	\$137	3
Behavior Treatment Plan Review - Monitoring Activities	H2000	TS	15 Minutes	159	1,081	\$319,350	\$2,008	\$295	7
Comprehensive Medication Services - EBP only	H2010		15 Minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention	H2011		15 Minutes	19,779	93,971	\$11,982,253	\$606	\$128	5
Crisis Intervention	H2011	НВ	15 Minutes	678	3,063	\$536,815	\$792	\$175	5
Crisis Intervention	H2011	HC	15 minutes	17	93	\$16,382	\$964	\$176	5
Substance Use Disorder: Crisis Intervention, per 15 minutes	H2011	HF	15 Minutes	30	101	\$7,536	\$251	\$75	3
Crisis Intervention	H2011	TJ	15 Minutes	113	643	\$168,478	\$1,491	\$262	6
Skill-Building and Out of Home Non Vocational Habilitation	H2014		15 Minutes	4,510	5,149,205	\$18,296,208	\$4,057	\$4	1,142
Out of Home Non Vocational Habilitation	H2014	HK	Per Diem	18	44,232	\$157,386	\$8,744	\$4	2,457
Community Living Supports (15 Minutes)	H2015		15 Minutes	5,994	1,307,415	\$10,385,723	\$1,733	\$8	218
Community Living Supports (15 Minutes)	H2015	TT	15 Minutes	1,072	374,064	\$2,506,817	\$2,338	\$7	349
Community Living Supports (Daily)	H2016		15 Minutes	5,454	1,351,082	\$161,831,993	\$29,672	\$120	248
Behavior Services	H2019		Days	1,143	46,353	\$2,816,403	\$2,464	\$61	41
Behavior Services	H2019	TT	Days	1,100	77,211	\$3,057,687	\$2,780	\$40	70
Wraparound	H2021		15 minutes	35	1,843	\$189,136	\$5,404	\$103	53
Wraparound (SED Waiver)	H2022		15 Minutes	17	182	\$71,301	\$4,194	\$392	11
Wraparound (SED Waiver)	H2022	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services	H2023	-	15 Minutes	4,859	963,335	\$13,171,460	\$2,711	\$14	198
Mental Health Therapy	H2027	-	15 Minutes	0	0	\$0	\$0	\$0	0
	000, 0914, 0915, H2027 016, 0919	HF	Days	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs	H2030		Hour	3,353	3,785,854	\$22,692,433	\$6,768	\$6	1,129
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Adults with Mental Illness

SUB-ELEMENT COST REPORT: Fiscal Year 2019

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Statewide Summary				TT-1						
Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Home Based Services		H2033		Per Diem	3	268	\$20,700	\$6,900	\$77	89
Substance Use Disorder: Recovery Housing		H2034		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035	HF	Per Service	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036	HF	Per Mile	0	0	\$0	\$0	\$0	0
Telemedicine Facility Fee		Q3014	GT	Per Mile	6,348	19,952	\$670,677	\$106	\$34	3
Transportation		S0209		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Transportation		S0215	HF	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	57	764	\$27,931	\$490	\$37	13
Family Training		S5111		Encounter	80	442	\$72,954	\$912	\$165	6
Family Training		S5111	НА	Days	0	0	\$0	\$0	\$0	0
Family Training		S5111	НМ	Days	33	301	\$69,539	\$2,107	\$231	9
Foster Care		S5140		Per Diem	0	0	\$0	\$0	\$0	0
Foster Care		S5145		Encounter	1	233	\$77,124	\$77,124	\$331	233
Respite		S5150		Month	0	0	\$0	\$0	\$0	0
Respite		S5151		Service	2	22	\$3,101	\$1,550	\$141	11
Personal Emergency Response System (PERS)		S5160		Items	3	3	\$3,850	\$1,283	\$1,283	1
Personal Emergency Response System (PERS)		S5161		Encounter	31	236	\$365,846	\$11,801	\$1,550	8
Environmental Modification		S5165		Hour	1	1	\$2,000	\$2,000	\$2,000	1
Enhanced Medical Equipment-Supplies		S5199		Hour	1	1	\$290	\$290	\$290	1
Occupational or Physical Therapy		S8990		Hour	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 minutes	10,164	27,472	\$2,074,616	\$204	\$76	3
Health Services		S9446		Hour	312	1,306	\$433,317	\$1,389	\$332	4
Health Services		S9470		Hour	92	344	\$137,327	\$1,493	\$399	4
Prevention Services - Direct Model		S9482		Days	183	9,040	\$629,892	\$3,442	\$70	49
Intensive Crisis Stabilization-Enrolled Program		S9484		Days	575	8,063	\$1,375,152	\$2,392	\$171	14
Intensive Crisis Stabilization-Enrolled Program		S9484	TJ	Up to 15 min	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976	-	Up to 15 min	1,549	29,094	\$1,107,586	\$715	\$38	19
Substance Use Disorder: Residential Room and Board		S9976	HF	Up to 15 min	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Up to 15 min	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment										

Adults with Mental Illness

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Peach Services	Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Repire Case	Health Services		T1002			11,841	55,520	\$4,264,335	\$360	\$77	5
Propine Care Tibos TE Discounter 1 106 S.33 S.33 S.33 D.35 Discounter Care (Chileten) Warver & SED Warver) Tibos T	Respite Care		T1005		15 minutes	54	43,999	\$160,129	\$2,965	\$4	815
Properties Pro	Respite Care		T1005	TD	Encounter	0	0	\$0	\$0	\$0	0
Subsance Up Disorder: Treatment Planning Till07	Respite Care		T1005	TE	Encounter	0	0	\$0	\$0	\$0	0
Subtanee Ue Disorder: Chalf String Services Tillog 15 minutes 20 339 33,413 371 310 17 17 18 19 19 19 19 19 19 19	Respite Care (Children's Waiver & SED Waiver)		T1005	TT	Encounter	1	106	\$333	\$333	\$3	106
Substance Use Disorder: Recovery Supports Services T1015	Substance Use Disorder: Treatment Planning		T1007	HF	Encounter	475	541	\$90,562	\$191	\$167	1
Pumply Psycho-Edocation - EBP	Substance Use Disorder: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Property Coordination Warp Facilitation Tillor Encounter 64,000 15,15,000 \$12,28872 \$1,788 \$374 \$2,88 \$1,000	Substance Use Disorder: Recovery Support Services		T1012		15 minutes	20	339	\$3,413	\$171	\$10	17
Personal Residence Tilop Encounter Sel. Minutes Sel.	Family Psycho-Education - EBP		T1015		15 minutes	110	783	\$106,271	\$966	\$136	7
Naming Home Mental Health Monitoring T1017 SE 15 Minutes L331 38,068 \$2,373,164 \$1,783 \$62 29 Personal Clare in Licensed Specialized Residential Setting T1020 Items 4,388 973,149 \$8,095,1937 \$1,162 \$23 223 Assessmens T1023 Encounter 24,817 \$5,601 \$18,55,375 \$748 \$52,10 \$1 Assessmens T1023 Encounter 9 231 \$25,055 \$2,879 \$112 \$2.60 Indianced Medical Supplies or Pharmacy T1999 Per Diem 010 074 \$30,099 \$398 \$5,90 \$0.000 Indianced Medical Supplies or Pharmacy T1999 Per Diem 010 074 \$30,099 \$399 \$5,90 \$0.000 Indianced Medical Equipment-Supples or Pharmacy T1999 Per Diem 010 074 \$30,099 \$399 \$5,90 \$0.000 Indianced Medical Equipment-Supples or Pharmacy T1999 Per Diem 010 074 \$30,099 \$399 \$5,90 \$0.000 Indianced Medical Equipment-Supples or Pharmacy T1999 Per Diem 010 074 \$30,099 \$390 \$5,00 \$0.000 Indianced Medical Equipment-Supples or Pharmacy T1999 Per Diem 010 074 \$30,099 \$390 \$5,00 \$0.000 Indianced Medical Equipment-Supples or Pharmacy T1999 Per Diem 010 074 \$30,099 \$390 \$	Supports Coordination/Wrap Facilitation		T1016		Days	10,357	166,694	\$12,812,087	\$1,237	\$77	16
Personal Care in Licensed Specialized Residential Setting T1020 Encounter 24,817 35,601 \$18,552,375 \$148 \$521 17	Targeted Case Management		T1017		Encounter	64,000	1,515,096	\$112,538,932	\$1,758	\$74	24
Prevention Services - Direct Model T1027 Encounter 9 231 \$25,915 \$2,877 \$112 26	Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	1,331	38,068	\$2,373,164	\$1,783	\$62	29
Prevention Services - Direct Model T1027 Encounter 9 231 S25,915 S2,879 S112 26	Personal Care in Licensed Specialized Residential Setting		T1020		Items	4,358	973,149	\$50,951,937	\$11,692	\$52	223
Per Diem 101 774 \$30,099 \$298 \$39 88 70 70	Assessments		T1023		Encounter	24,817	35,601	\$18,552,375	\$748	\$521	1
Per Diem Per Diem 0 0 50 50 50 50 50 50	Prevention Services - Direct Model		T1027		Encounter	9	231	\$25,915	\$2,879	\$112	26
Substance Use Disorder: Transportation T2001	Enhanced Medical Supplies or Pharmacy		T1999		Per Diem	101	774	\$30,099	\$298	\$39	8
Transportation T2002 Encounter / Trip 107 107 \$2,314 \$22 \$22 \$2 \$2 \$2 \$2 \$2	Transportation		T2001		Per Diem	0	0	\$0	\$0	\$0	0
Nubstance Use Disorder: Transportation T2002 HF Encounter 1,260 2,990 \$637,818 \$506 \$213 2 2 2 2 2 2 2 2 2	Substance Use Disorder: Transportation		T2001	HF	Encounter / Trip	2	9	\$179	\$89	\$20	5
Transportation T2003 Encounter 1,260 2,990 8637,818 \$506 \$213 2	Transportation		T2002		Encounter / Trip	107	107	\$2,314	\$22	\$22	1
Substance Use Disorder: Transportation T2003 HF Encounter 1	Substance Use Disorder: Transportation		T2002	HF	Encounter	0	0	\$0	\$0	\$0	0
Transportation T2004 Encounter 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$15 \$6 Substance Use Disorder: Transportation T2005 Month 0 0 \$0<	Transportation		T2003		Encounter	1,260	2,990	\$637,818	\$506	\$213	2
Substance Use Disorder: Transportation T2004 HF Hour 26 157 \$2,329 \$90 \$15 6 Transportation T2005 Month 0 0 \$	Substance Use Disorder: Transportation		T2003	HF	Encounter	1	1	\$461	\$461	\$461	1
Transportation T2005 Month 0 0 \$0	Transportation		T2004		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Transportation T2005 HF 0 0 \$0 <td>Substance Use Disorder: Transportation</td> <td></td> <td>T2004</td> <td>HF</td> <td>Hour</td> <td>26</td> <td>157</td> <td>\$2,329</td> <td>\$90</td> <td>\$15</td> <td>6</td>	Substance Use Disorder: Transportation		T2004	HF	Hour	26	157	\$2,329	\$90	\$15	6
Out of Home Prevocational Service T2015 Month 0 0 \$0	Transportation		T2005		Month	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model T2024 Items 1 23 \$3,748 \$3,748 \$163 23 Fiscal Intermediary Services T2025 Per session. One night = one session 270 1,841 \$341,363 \$1,264 \$185 7 Enhanced Medical Equipment-Supplies T2028 Per session. One dalypartial day = one session 2 7 \$2,075 \$1,037 \$296 4 Enhanced Medical Equipment-Supplies T2029 Service 2 20 \$962 \$481 \$48 10	Substance Use Disorder: Transportation		T2005	HF		0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services T2025 Per session. One night = one session 270 1,841 \$341,363 \$1,264 \$185 7	Out of Home Prevocational Service		T2015		Month	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies T2028 Per session. One day/partial day = one session Per	Prevention Services - Direct Model		T2024		Items	1	23	\$3,748	\$3,748	\$163	23
Enhanced Medical Equipment-Supplies T2029 Service 2 20 \$962 \$481 \$48 10	Fiscal Intermediary Services		T2025			270	1,841	\$341,363	\$1,264	\$185	7
	Enhanced Medical Equipment-Supplies		T2028		day/partial day = one	2	7	\$2,075	\$1,037	\$296	4
Respite Care T2036 Items 4 18 \$2,679 \$670 \$149 5	Enhanced Medical Equipment-Supplies		T2029		Service	2	20	\$962	\$481	\$48	10
	Respite Care		T2036		Items	4	18	\$2,679	\$670	\$149	5

Adults with Mental Illness

SUB-ELEMENT COST REPORT: Fiscal Year 2019

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite Care		T2037		Per Item	0	0	\$0	\$0	\$0	0
Housing Assistance		T2038		Per Item	168	183	\$843,323	\$5,020	\$4,608	1
Enhanced Medical Equipment-Supplies		T2039			0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK		0	0	\$0	\$0	\$0	0
Wraparound Services		T5999			0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					117	0	\$778,980	\$6,658	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			390	0	\$38,528	\$99	\$0	0
Total Population and Cost					167,383		\$976,242,593			

Children with Serious Emotional Disturbance

SUB-ELEMENT COST REPORT: Fiscal Year 2019

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State of Michigan

Profession Pro	Statewide summary				Unit						
Record Psychiatric Hospital MDD Pfollowalided per dom	Service Category	Revenue Code	HCPCS Code	Modifier		Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Part	Local Psychiatric Hospital/IMD PT68 bundled per diem	0100		PT68	Days	1,976	20,306	\$16,743,298	\$8,473	\$825	10
Profess Prof	Local Psychiatric Hospital/IMD PT68bundled per diem	0100		PT68	Days	335	3,123	\$1,483,958	\$4,430	\$475	9
Part				PT68	Days	269	3,061	\$1,888,310	\$7,020	\$617	11
Process Proc				PT68	Days	20	183	\$9,410	\$470	\$51	9
Per Norm Per Norm		0100		PT73	Days	705	6,325	\$5,450,384	\$7,731	\$862	9
P73-physician costs schulade		0100		PT73	Days	51	364	\$110,858	\$2,174	\$304	7
PTS				PT73	Days	110	823	\$668,130	\$6,074	\$812	7
P173 Days 0 0 \$68,933 30 30 30 30 30 30 30				PT73	Days	4	20	\$3,777	\$944	\$189	5
Impatient Hospital Ancillary Services - Room and Board 0144	Local Psychiatric Hospital/IMD			PT68	Amount	0	0	\$51,272	\$0	\$0	0
Paptient Hospital Ancillary Services - Paurmacy 0.250-0.254, 0.2577- # of tests 0 0 0 50 50 50 50 50	Local Psychiatric Hospital/Acute Community			PT73	Days	0	0	\$68,933	\$0	\$0	0
Papatient Hospital Ancillary Services - Pharmacy 10	Inpatient Hospital Ancillary Services - Room and Board	0144			# of items	0	0	\$0	\$0	\$0	0
Particum Hospital Ancillary Services - Medical/Surgicial Popularity 10 10 10 10 10 10 10 1	Inpatient Hospital Ancillary Services - Leave of Absence	0183			# of tests	0	0	\$0	\$0	\$0	0
Supplies and Devices Supplies And Elory Services - Laboratory 0300-0302, 0305-0307 # of treatments 0 0 80 80 80 80 80 80	Inpatient Hospital Ancillary Services - Pharmacy				# of tests	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Radiology 0320		0270-0272				0	0	\$0	\$0	\$0	0
ECT Anesthesia 0370	Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of treatments	0	0	\$0	\$0	\$0	0
Impatient Hospital Ancillary Services - Respiratory Services 0410	Inpatient Hospital Ancillary Services - Radiology	0320			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Physical Therapy 0420-0424 # of tests 0 0 0 \$0 \$0 \$0 \$0 \$0	ECT Anesthesia	0370			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy 0430-0434 # of tests 0 0 0 50 50 50 50 0 Inpatient Hospital Ancillary Services - Speech-Language Pathology # of tests 0 0 0 50 50 50 50 50	Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of visits	0	0	\$0	\$0	\$0	0
Pathology Pathology Pathology Pathology Possible Ancillary Services - Emergency Room 0450 \$0	Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function 0460 # of units 0 0 0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0		0440-0444			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology 0470-0472 0 S0 S	Inpatient Hospital Ancillary Services - Emergency Room	0450			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance 0610-0611 # of tests 0 0 \$0 \$0 \$0 \$0 \$0 \$0	Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of units	0	0	\$0	\$0	\$0	0
Technology (MRT) Inpatient Hospital Ancillary Services - Pharmacy 0636 # of tests 0 0 \$0	Inpatient Hospital Ancillary Services - Audiology	0470-0472				0	0	\$0	\$0	\$0	0
		0610-0611			# of tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room 0710 Hour 0 0 \$0 \$0 \$0 \$0 \$0 \$0 0	Inpatient Hospital Ancillary Services - Pharmacy	0636	-	·	# of tests	0	0	\$0	\$0	\$0	0
	ECT Recovery Room	0710	-	-	Hour	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of visits	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Days	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Facility Charge	0901			Days	4	102	\$86,797	\$21,699	\$851	26
Inpatient Hospital Ancillary Services - Psychiatric/Psychological Treatments/Services	0900, 0902-0904, 0911, 0914-0919			# of tests	0	0	\$0	\$0	\$0	0
Outpatient Partial Hospitalization	0912			# of visits	2,026	20,279	\$5,276,385	\$2,604	\$260	10
Outpatient Partial Hospitalization	0913			Minutes	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Diagnosis Service	s 0925			Minutes	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Other Therapeutic Services	0940-0942			Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia		00104		First 30 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Anesthesia	0901	00104		15 Minutes	0	0	\$0	\$0	\$0	0
ABA Behavior Identification Assessment (Note: code retired 12/31/18)		0359T	U5	Each Additional 30 Minutes	185	188	\$63,383	\$343	\$337	1
ABA Behavioral Follow-up Assessment (reporting units of per 15 minutes effective 1/1/19)		0362T	U5	First 30 Minutes	41	140	\$7,919	\$193	\$57	3
ABA Behavioral Follow-up Assessment (reporting units of per 15 minutes effective 1/1/19)		0362T	U5	Each Additional 30 Minutes	3	17	\$513	\$171	\$30	6
ABA Behavioral Follow-up Assessment (Note: code retired 12/31/18)		0363T	U5	First 30 Minutes	18	118	\$7,282	\$405	\$62	7
ABA Adaptive Treatment(Note: code retired 12/31/18)		0364T	U5	Each Additional 30 Minutes	427	11,505	\$380,823	\$892	\$33	27
ABA Adaptive Treatment(Note: code retired 12/31/18)		0365T	U5	First 30 Minutes	425	67,018	\$2,163,317	\$5,090	\$32	158
ABA Group Adaptive Behavior Treatment(Note: code retired 12/31/18)		0366T	U5	Each Additional 30 Minutes	37	697	\$31,388	\$848	\$45	19
ABA Group Adaptive Behavior Treatment(Note: code retired 12/31/18)		0367T	U5	Encounter	30	376	\$9,425	\$314	\$25	13
ABA Clinical Observation and Direction of Adaptive Behavior Treatment(Note: code retired 12/31/18)		0368T	U5	Encounter	370	3,090	\$175,068	\$473	\$57	8
ABA Clinical Observation and Direction of Adaptive Behavior Treatment(Note: code retired 12/31/18)		0369T	U5	Encounter	361	6,586	\$373,667	\$1,035	\$57	18
ABA Family Behavior Treatment Guidance(Note: code retired 12/31/18)		0370T	U5	First 60 Minutes	228	619	\$65,087	\$285	\$105	3
ABA Family Behavior Treatment Guidance(Note: code retired 12/31/18)		0371T	U5	Per 15 Minutes	5	6	\$444	\$89	\$74	1
ABA Adaptive Behavior Treatment Social Skills Group(Note: code retired 12/31/18)		0372T	U5	Each Additional 30 Minutes	0	0	\$0	\$0	\$0	0

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ABA Exposure Adaptive Behavior Treatment (reporting units changed effective 1/1/19 - see new line below)		0373T	U5	Encounter	10	2,199	\$59,963	\$5,996	\$27	220
ABA Exposure Adaptive Behavior Treatment (reporting units of per 15 minutes effective 1/1/19)		0373T	U5	Encounter	3	3,065	\$78,298	\$26,099	\$26	1,022
ABA Exposure Adaptive Behavior Treatment(Note: code retired 12/31/18)		0374T	U5	Encounter	6	770	\$47,457	\$7,910	\$62	128
Drug Screen		80305		Encounter	0	0	\$0	\$0	\$0	0
Drug Screen		80306		Encounter	0	0	\$0	\$0	\$0	0
Drug Screen		80307		Encounter	0	0	\$0	\$0	\$0	0
Interactive Complexity - Add On Code		90785		Encounter	280	1,202	\$71,628	\$256	\$60	4
Assessment for Autism		90785	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse - Interactive Complexity - Add On Code		90785	HF	Encounter	0	0	\$0	\$0	\$0	0
Assessment		90791		Encounter	2,646	2,872	\$1,187,043	\$449	\$413	1
Substance Use: Assessment		90791	HF	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90791	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessment		90792		30 Minutes	6,381	6,548	\$2,919,309	\$458	\$446	1
Substance Use: Assessment		90792	HF	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		90792	U5	30 Minutes	0	0	\$0	\$0	\$0	0
Mental Health: Outpatient Care		90832		45 Minutes	8,686	22,037	\$2,428,057	\$280	\$110	3
Substance Use Disorder: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832	HF	45 Minutes	85	236	\$24,171	\$284	\$102	3
Assessment		90833		45 Minutes	6	6	\$767	\$128	\$128	1
Mental Health: Outpatient Care		90834		60 Minutes	13,617	59,056	\$8,747,238	\$642	\$148	4
Substance Use Disorder: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834	HF	60 Minutes	13	64	\$6,861	\$528	\$107	5
Assessment		90836		60 Minutes	11	16	\$4,408	\$401	\$276	1
Mental Health: Outpatient Care		90837		First 30-74 Min.	12,319	56,489	\$12,546,749	\$1,018	\$222	5
Substance Use Disorder: Outpatient Care		90837	HF	Each Additional 30 Minutes	8	28	\$5,063	\$633	\$181	4
Assessment		90838		Encounter	12	18	\$5,188	\$432	\$288	2
Psychotherapy for Crisis First 60 Minutes		90839		Encounter	128	145	\$28,680	\$224	\$198	1
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter	20	42	\$4,164	\$208	\$99	2
Therapy-Family Therapy		90846		Encounter	3,394	8,534	\$1,612,867	\$475	\$189	3
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846	HF	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	11,466	50,478	\$8,603,367	\$750	\$170	4

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Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847	HF	Encounter	113	440	\$58,310	\$516	\$133	4
Therapy-Family Therapy		90849		Encounter	131	527	\$101,375	\$774	\$192	4
Therapy-Family Therapy		90849	HS	Encounter	98	435	\$121,043	\$1,235	\$278	4
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849	HF		0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	1,526	8,903	\$1,158,078	\$759	\$130	6
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853	HF	Encounter	7	14	\$1,428	\$204	\$102	2
Pharmacological Management (SED Waiver)		90863		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-ECT Physician		90870		Encounter	4	4	\$140	\$35	\$35	1
Additional Codes-ECT Physician	0901	90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	227	339	\$23,767	\$105	\$70	1
Speech & Language Therapy		92507		Encounter	37	1,185	\$99,845	\$2,699	\$84	32
Speech & Language Therapy		92508		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92521		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92522		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92523		First Hour	29	36	\$6,296	\$217	\$175	1
Speech & Language Therapy		92524		Each Additional 30 Minutes	3	36	\$3,187	\$1,062	\$89	12
Speech & Language Therapy		92526		Encounter	1	1	\$85	\$85	\$85	1
Speech & Language Therapy		92607		Encounter	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92608		First Hour	0	0	\$0	\$0	\$0	0
Speech & Language Therapy		92609		Each Additional 15 Minutes	1	11	\$1,227	\$1,227	\$112	11
Speech & Language Therapy		92610		Encounter	0	0	\$0	\$0	\$0	0
Assessments - Testing(Note: code retired 12/31/18)		96101		Hour	207	693	\$212,921	\$1,029	\$307	3
Assessment for Autism(Note: code retired 12/31/18)		96101	U5	Per Hour	73	183	\$36,751	\$503	\$201	3
Assessments - Testing(Note: code retired 12/31/18)		96102		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism(Note: code retired 12/31/18)		96102	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessments - Testing(Note: code retired 12/31/18)	-	96103	-	Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		First Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Each Additional 30 Minutes	140	236	\$29,500	\$211	\$125	2
Assessments - Other(Note: code retired 12/31/18)		96111		Per Hour	0	0	\$0	\$0	\$0	0
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Service Charger Service Ch	Statewide summary				Unit						
Accouncer's Trolling		Revenue Code		Modifier							
Neurobehoxid States East State					Per Hour						0
Assessment Totalign Novement Totalign Novement Totalign Novement Totalign Novement Totalign Novement Totalign Novement Novemen	Assessments - Testing		96113		Hour	0	0	\$0	\$0	\$0	0
Assessment for Authon/Nets code retailed [253-176] 99118 US Per Horn 16 77 510,230 5639 533 3 3 Assessments - Texting (Note: code retaired [2531/18) 99119 US C	Neurobehavioral Status Exam		96116		Per Hour	0	0	\$0	\$0	\$0	0
Assessments Tering Noor code retired	Assessments - Testing(Note: code retired 12/31/18)		96118		Hour	19	65	\$8,086	\$426	\$124	3
Assessment for Authorn Notice of certained 1231/18) 96119 US First Flour 0 0 0 50 50 50 50 0 0 Assessments - Testing Note: code retired 1231/18) 96120 First Flour 0 0 0 50 50 50 50 0 0 Assessments - Testing 96121 First Flour 0 0 0 50 50 50 50 0 0 Assessments - Testing 96121 First Flour 0 0 0 50 50 50 50 0 0 Assessments - Testing 96120 First Flour 573 643 5350/18 5427 559 17 Assessments - Testing 96130 US First Hour 30 8 867 5154-006 550 578 578 578 579 17 Assessments - Testing 96130 US First Hour 30 8 867 5154-006 550 578 578 579 579 579 579 579 579 579 579 579 579	Assessment for Autism(Note: code retired 12/31/18)		96118	U5	Per Hour	16	77	\$10,230	\$639	\$133	5
Assessments - Testing Note: code retired 12/31/18) 96120	Assessments - Testing(Note: code retired 12/31/18)		96119		Each Additional Hour	0	0	\$0	\$0	\$0	0
Assessments Testing 96121 First Hunt 0 0 0 50 50 50 0 0 0	Assessment for Autism(Note: code retired 12/31/18)		96119	U5		0	0	\$0	\$0	\$0	0
Assessments-Other 96127 Each Additional Hour 0 0 0 0 S0 S0 S0 S0 S0 0 0 Assessments - Testing 96130 Each Additional Hour 573 643 S559,118 5627 S559 1 Assessment for Authinn 96130 U5 First Hour 248 260 S47238 S190 S180 1 S559,118 Assessments - Testing 96131 U5 Each Additional Hour 131 225 S43,231 S330 S192 2 Assessments - Testing 96132 U5 Each Additional Hour 131 225 S43,231 S330 S192 2 Assessments - Testing 96132 U5 Each Additional Hour 0 0 0 S0	Assessments - Testing(Note: code retired 12/31/18)		96120		First Hour	0	0	\$0	\$0	\$0	0
Assessments - Testing 96150 Each Additional Hour 573 643 S359,118 S627 S559 1 Assessment for Authinn 96130 US First Hour 248 262 S47,238 S190 S180 1 Assessments - Testing 96131 First Hour 308 867 S154,406 S501 S178 3 Assessments for Authinn 96131 US Each Additional Hour 151 225 S43,231 S330 S192 2 Assessments - Testing 96132 Each Additional Hour 0 0 0 S0	Assessments - Testing		96121		First Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism 96130 U5 First Hour 308 867 \$154,406 \$501 \$178 \$30 \$48essment for Autism 96131 U5 Each Additional Hour 131 225 \$43,231 \$300 \$500 \$500 \$500 \$500 \$500 \$500 \$500	Assessments-Other		96127		Each Additional Hour	0	0	\$0	\$0	\$0	0
Assessments - Testing 96131 First Hour 308 867 \$154.06 \$501 \$178 32 \$25 \$343.21 \$330 \$192 \$25 \$243.21 \$330 \$192 \$25 \$243.221 \$25 \$243.221 \$25 \$243.221 \$25	Assessments - Testing		96130		Each Additional Hour	573	643	\$359,118	\$627	\$559	1
Assessment for Autism 96131 U5 Each Additional Hour 0 0 0 80 80 80 80 0 0 Assessment Freiting 96132 Each Additional Hour 0 0 0 80 80 80 80 0 0 Assessment Freiting 96132 U5 First 30 Minutes 24 24 83,307 3138 5138 11 Assessment Freiting 96133 First 30 Minutes 0 0 0 80 80 80 90 0 0 80 80 80 90 80 80 80 80 80 80 80 80 80 80 80 80 80	Assessment for Autism		96130	U5	First Hour	248	262	\$47,238	\$190	\$180	1
Assessments - Testing 96132 Each Additional Hour 0 0 80 80 80 80 80 80	Assessments - Testing		96131		First Hour	308	867	\$154,406	\$501	\$178	3
Assessment for Autism 96132 U5 First 30 Minutes 24 24 53,307 5138 5138 1	Assessment for Autism		96131	U5	Each Additional Hour	131	225	\$43,231	\$330	\$192	2
Assessments - Testing 96133 First 30 Minutes 0 0 50 50 50 0	Assessments - Testing		96132		Each Additional Hour	0	0	\$0	\$0	\$0	0
Passessment for Autism Passessment for Aut	Assessment for Autism		96132	U5	First 30 Minutes	24	24	\$3,307	\$138	\$138	1
Assessments - Testing 96136 160 161 11,033 160 161 16	Assessments - Testing		96133		First 30 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism 96136 U5 First 30 Minutes 182 213 \$13,478 \$74 \$63 1 Assessments - Testing 96137 Each Additional 30 155 942 \$60,895 \$393 \$65 \$6 Assessment for Autism 96137 U5 Encounter 184 685 \$46,019 \$250 \$67 4 Assessments - Testing 96138 Encounter 0 0 0 \$50 \$50 \$60 \$60 \$60 \$60 \$60 \$60 \$60 \$60 \$60 \$6	Assessment for Autism		96133	U5		24	59	\$8,431	\$351	\$143	2
Assessments - Testing 96137 Each Additional 30 Minutes 155 942 \$60,895 \$393 \$65 6 Assessment for Autism 96137 U5 Encounter 184 685 \$46,019 \$250 \$67 4 Assessments - Testing 96138 Encounter 0 0 \$0 <td>Assessments - Testing</td> <td></td> <td>96136</td> <td></td> <td></td> <td>160</td> <td>161</td> <td>\$11,033</td> <td>\$69</td> <td>\$69</td> <td>1</td>	Assessments - Testing		96136			160	161	\$11,033	\$69	\$69	1
Minutes Assessment for Autism 96137 U5 Encounter 184 685 \$46,019 \$250 \$67 4	Assessment for Autism		96136	U5	First 30 Minutes	182	213	\$13,478	\$74	\$63	1
Assessments - Testing 96138 Encounter 0 0 \$0	Assessments - Testing		96137			155	942	\$60,895	\$393	\$65	6
Assessments - Testing 96139 15 Minutes 0 0 \$0	Assessment for Autism		96137	U5	Encounter	184	685	\$46,019	\$250	\$67	4
Assessments - Testing 96146 15 Minutes 0 0 \$0	Assessments - Testing		96138		Encounter	0	0	\$0	\$0	\$0	0
Medication Administration 96372 15 Minutes 108 408 \$47,271 \$438 \$116 4 Occupational or Physical Therapy 97110 15 Minutes 38 1,498 \$40,563 \$1,067 \$27 39 Occupational or Physical Therapy 97112 15 Minutes 32 1,368 \$30,564 \$955 \$22 43 Occupational or Physical Therapy 97113 15 Minutes 0 0 \$0 <	Assessments - Testing		96139		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy 97110 15 Minutes 38 1,498 \$40,563 \$1,067 \$27 39 Occupational or Physical Therapy 97112 15 Minutes 32 1,368 \$30,564 \$955 \$22 43 Occupational or Physical Therapy 97113 15 Minutes 0 0 \$0	Assessments - Testing		96146		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy 97112 15 Minutes 32 1,368 \$30,564 \$955 \$22 43 Occupational or Physical Therapy 97113 15 Minutes 0 0 \$0	Medication Administration		96372		15 Minutes	108	408	\$47,271	\$438	\$116	4
Occupational or Physical Therapy 97113 15 Minutes 0 0 \$0 </td <td>Occupational or Physical Therapy</td> <td></td> <td>97110</td> <td></td> <td>15 Minutes</td> <td>38</td> <td>1,498</td> <td>\$40,563</td> <td>\$1,067</td> <td>\$27</td> <td>39</td>	Occupational or Physical Therapy		97110		15 Minutes	38	1,498	\$40,563	\$1,067	\$27	39
Occupational or Physical Therapy 97116 Encounter 0 0 \$0 \$0 \$0 \$0 \$0 \$0	Occupational or Physical Therapy		97112		15 Minutes	32	1,368	\$30,564	\$955	\$22	43
	Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy 97124 15 Minutes 0 0 \$0 \$0 \$0 \$0 \$0 0	Occupational or Physical Therapy		97116		Encounter	0	0	\$0	\$0	\$0	0
	Occupational or Physical Therapy		97124		15 Minutes	0	0	\$0	\$0	\$0	0

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Occupational or Physical Therapy		97140		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97150		15 Minutes	1	6	\$1,371	\$1,371	\$228	6
ABA Behavior Identification Assessment (new code effective 1/1/19)		97151	U5	15 Minutes	512	5,430	\$160,379	\$313	\$30	11
ABA Adaptive Behavior Treatment (new code effective 1/1/19)		97153	U5	15 Minutes	944	564,324	\$9,225,539	\$9,773	\$16	598
ABA Group Adaptive Behavior Treatment(new code effective 1/1/19)		97154	U5	15 Minutes	35	6,918	\$137,388	\$3,925	\$20	198
ABA Clinical Observation and Direction of Adaptive Behavior Treatment(new code effective 1/1/19)		97155	U5	15 Minutes	682	69,116	\$1,865,881	\$2,736	\$27	101
ABA Family Behavior Treatment Guidance(new code effective 1/1/19)		97156	U5	Encounter	465	8,105	\$217,772	\$468	\$27	17
ABA Family Behavior Treatment Guidance(new code effective 1/1/19)		97157	U5	Encounter	16	123	\$2,558	\$160	\$21	8
ABA Adaptive Behavior Treatment Social Skills Group(new code effective 1/1/19)		97158	U5	Encounter	2	49	\$1,692	\$846	\$35	25
Physical Therapy		97161		Encounter	2	3	\$665	\$332	\$222	2
Physical Therapy		97162		Encounter	1	1	\$194	\$194	\$194	1
Physical Therapy		97163		Encounter	0	0	\$0	\$0	\$0	0
Physical Therapy		97164		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		97165		Encounter	35	36	\$8,641	\$247	\$240	1
Occupational Therapy		97166		15 Minutes	63	64	\$17,393	\$276	\$272	1
Occupational Therapy		97167		15 Minutes	29	30	\$10,988	\$379	\$366	1
Occupational Therapy		97168		15 Minutes	60	79	\$14,572	\$243	\$184	1
Occupational or Physical Therapy		97530		15 Minutes	70	5,026	\$154,266	\$2,204	\$31	72
Occupational or Physical Therapy		97533		15 Minutes	63	3,976	\$175,760	\$2,790	\$44	63
Occupational or Physical Therapy		97535		15 Minutes	8	98	\$6,770	\$846	\$69	12
Occupational or Physical Therapy		97537		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97542		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97750		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational Therapy		97755		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97760		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97763		30 Minutes	0	0	\$0	\$0	\$0	0
Assessment or Health Services	-	97802	-	Encounter	11	47	\$6,335	\$576	\$135	4
Assessment or Health Services		97803		Encounter	3	18	\$723	\$241	\$40	6
Health Services		97804		Encounter	0	0	\$0	\$0	\$0	0
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Substance Use Disorder: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Encounter	57	58	\$8,051	\$141	\$139	1
Substance Use Disorder: New Patient Evaluation and Management		99201	HF	Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Encounter	83	84	\$9,840	\$119	\$117	1
Substance Use Disorder: New Patient Evaluation and Management		99202	HF	Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Encounter	58	58	\$12,028	\$207	\$207	1
Substance Use Disorder: New Patient Evaluation and Management		99203	HF	Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99204		Encounter	118	118	\$39,080	\$331	\$331	1
Substance Use Disorder: New Patient Evaluation and Management		99204	HF	Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Encounter	412	414	\$164,941	\$400	\$398	1
Substance Use Disorder: New Patient Evaluation and Management		99205	HF	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Encounter	770	1,290	\$182,670	\$237	\$142	2
Substance Use Disorder: Established Patient Evaluation and Management		99211	HF	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	1,797	3,936	\$454,155	\$253	\$115	2
Substance Use Disorder: Established Patient Evaluation and Management		99212	HF	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	9,736	26,575	\$4,387,597	\$451	\$165	3
Sustance Abuse: Established Patient Evaluation and Management		99213	HF	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		Encounter	8,727	25,072	\$5,940,919	\$681	\$237	3
Substance Use Disorder: Established Patient Evaluation and Management		99214	HF	30 Minutes	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99215		50 Minutes	1,646	3,278	\$898,679	\$546	\$274	2
Substance Use Disorder: Established Patient Evaluation and Management		99215	HF	70 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	51	52	\$5,052	\$99	\$97	1
Additional Codes-Physician Services		99222		25 minutes	49	50	\$5,800	\$118	\$116	1
Additional Codes-Physician Services		99223		35 Minutes	36	39	\$7,326	\$204	\$188	1
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		25 minutes	0	0	\$0	\$0	\$0	0

Assessment

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Statewide summary

State of Michigan

Unit

Children with Serious Emotional Disturbance SUB-ELEMENT COST REPORT: Fiscal Year 2019

99325

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Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-Physician Services		99226		35 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		<= 30 Minutes	110	391	\$25,487	\$232	\$65	4
Additional Codes-Physician Services		99232		> 30 Minutes	74	193	\$15,799	\$214	\$82	3
Additional Codes-Physician Services		99233		15 Minutes	75	126	\$13,039	\$174	\$103	2
Additional Codes-Physician Services		99238		30 Minutes	59	64	\$5,067	\$86	\$79	1
Additional Codes-Physician Services		99239		40 Minutes	18	18	\$1,737	\$96	\$96	1
Substance Use Disorder: Physician Consultations		99241	HF	60 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99242	HF	80 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99243	HF	20 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99244	HF	40 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99245	HF	55 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99251	HF	80 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99252	HF	110 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99253	HF	25 minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99254	HF	35 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99255	HF	45 Minutes	0	0	\$0	\$0	\$0	0
Nursing Facility Services evaluation and management		99304		10 Minutes	0	0	\$0	\$0	\$0	0
Nursing Facility Services evaluation and management		99305		15 Minutes	0	0	\$0	\$0	\$0	0
Nursing Facility Services evaluation and management		99306		25 minutes	0	0	\$0	\$0	\$0	0
Nursing Facility Services evaluation and management		99307		35 Minutes	0	0	\$0	\$0	\$0	0
Nursing Facility Services evaluation and management		99308		Encounter	0	0	\$0	\$0	\$0	0
Nursing Facility Services evaluation and management		99309		Encounter	0	0	\$0	\$0	\$0	0
Nursing Facility Services evaluation and management		99310		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99324		Encounter	0	0	\$0	\$0	\$0	0

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Service Category	Revenue Code
Assessment	

Statewide summar	у			Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessment		99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99343		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment		99349		15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		99350		Per mile	0	0	\$0	\$0	\$0	0
Medication Administration		99506		Per mile	0	0	\$0	\$0	\$0	0
Medication Management		99605		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0080		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0090		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0100		Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Transportation		A0100	HF	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0110		Per one-way trip	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Transportation		A0110	HF	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			1	5	\$48	\$48	\$10	5
Transportation		A0130		Per Mile	0	0	\$0	\$0	\$0	0
Transportation		A0140		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Transportation		A0170		Items	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0425		Encounter	16	1,054	\$4,262	\$266	\$4	66
Additional Codes-Transportation		A0427		Encounter Session at least 45 min	8	8	\$1,185	\$148	\$148	1
Enhanced Medical Equipment-Supplies		E1399		15 Minutes	7	11	\$1,607	\$230	\$146	2
Family Training/Support EBP only		G0177		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		G0515		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Individual Assessment		H0001		15 Minutes	27	27	\$6,827	\$253	\$253	1
Assessment		H0002		Encounter	4,434	4,710	\$910,591	\$205	\$193	1
Substance Use Disorder: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Days	2	22	\$451	\$225	\$20	11
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Days	0	0	\$0	\$0	\$0	0

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Statewide summ Service Category	•	wanaa a l	M 155	Unit Measure	C.	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Use Disorder: Case Management	Revenue Code	HCPCS Code H0006	Modifier	Days	Cases 0	Units 0	Cost \$0	\$0	\$0	Onit/Case 0
Substance Use Disorder: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Outpatient Care	0906	H0015		Days	0	0	\$0	\$0	\$0	0
Crisis Residential Services	0,00	H0018		Encounter	647	4,821	\$2,121,851	\$3,280	\$440	7
Substance Use Disorder: Residential	1002	H0018	HF	Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Residential	1002	H0019	HF	Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Methadone	1002	H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Early Intervention		H0022		Face to Face Contact	1	1	\$49	\$49	\$49	
Peer Directed and Operated Support Services		H0023		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Recovery Support Services		H0023	HF	Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025			591	6,568	\$1,389,020	\$2,350	\$211	11
Assessment		H0031		Encounter	27,724	44,483	\$12,318,648	\$444	\$277	2
Assessment for Autism		H0031	U5	Encounter	635	758	\$335,409	\$528	\$442	1
Support Intensity Scale (SIS) Face-to-Face Assessment	i	H0031	HW	Direct Observation Encounter	0	0	\$0	\$0	\$0	0
Treatment Planning		H0032		15 Minutes	20,144	42,571	\$7,970,128	\$396	\$187	2
Monitoring of Treatment - Clinician		H0032	TS	15 Minutes	1,952	3,117	\$400,610	\$205	\$129	2
Substance Use Disorder: Pharmalogical Support - Subo	oxane	H0033		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 minutes	75	121	\$21,286	\$284	\$176	2
Home Based Services		H0036		15 Minutes	12,656	980,631	\$66,266,579	\$5,236	\$68	77
Home Based Services		H0036	ST	15 Minutes	330	13,165	\$1,083,036	\$3,282	\$82	40
Peer Directed and Operated Support Services		H0038			217	4,100	\$231,855	\$1,068	\$57	19
Peer Directed and Operated Support Services		H0038	TJ	15 Minutes	192	5,599	\$171,652	\$894	\$31	29
Substance Use Disorder: Recovery Support Services		H0038	HF	15 Minutes	2	8	\$105	\$52	\$13	4
Peer Directed and Operated Support Services		NA		Per Diem	0	0	\$257,520	\$0	\$0	0
Assertive Community Treatment (ACT)		H0039		Per Diem	6	84	\$8,528	\$1,421	\$102	14
Assertive Community Treatment (ACT)		H0039	TG	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own	home	H0043		Per Diem	13	155	\$19,330	\$1,487	\$125	12
Community Living Supports in Independent living/own	home	H0043	TF	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own	home	H0043	TG	Per Diem	2	68	\$12,698	\$6,349	\$187	34
Community Living Supports in Independent living/own	home	H0043	TT	Days	0	0	\$0	\$0	\$0	0

CMHSP Cost Data by Service Category State of Michigan Children with Serious Emotional Disturbance

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Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Community Living Supports in Independent living/own home	Revenue Code	H0043	TF/TT	Encounter	Cases	0	\$0	\$0	\$0	0
Community Living Supports in Independent living/own home		H0043	TG/TT	Encounter	0	0	\$0	\$0	\$0	0
Respite		H0045		15 Minutes	239	2,140	\$649,541	\$2,718	\$304	9
Peer Directed and Operated Support Services		H0046		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914,	H0050		15 minutes	0	0	\$0	\$0	\$0	0
	0915, 0916, 0919	******		453.5			00.510	00.10	0.100	
Behavior Treatment Plan Review		H2000		15 Minutes	15	27	\$3,719	\$248	\$138	2
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	15 Minutes	26	58	\$20,017	\$770	\$345	2
Comprehensive Medication Services - EBP only		H2010		15 Minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	5,068	26,054	\$2,817,890	\$556	\$108	5
Crisis Intervention		H2011	HB	15 Minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011	HC	15 minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Crisis Intervention, per 15 minutes		H2011	HF	15 Minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011	TJ	15 Minutes	2,987	15,262	\$2,018,556	\$676	\$132	5
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 Minutes	333	25,716	\$145,406	\$437	\$6	77
Out of Home Non Vocational Habilitation		H2014	HK	Per Diem	0	0	\$0	\$0	\$0	0
Community Living Supports (15 Minutes)		H2015		15 Minutes	1,518	552,023	\$3,825,069	\$2,520	\$7	364
Community Living Supports (15 Minutes)		H2015	TT	15 Minutes	670	797,736	\$3,801,768	\$5,674	\$5	1,191
Community Living Supports (Daily)		H2016		15 Minutes	7	1,093	\$385,359	\$55,051	\$353	156
Behavior Services		H2019		Days	271	5,344	\$272,904	\$1,007	\$51	20
Behavior Services		H2019	TT	Days	288	6,713	\$300,056	\$1,042	\$45	23
Wraparound		H2021		15 minutes	1,835	126,204	\$11,295,772	\$6,156	\$90	69
Wraparound (SED Waiver)		H2022		15 Minutes	483	7,136	\$2,755,166	\$5,704	\$386	15
Wraparound (SED Waiver)		H2022	TT	15 Minutes	0	0	\$0	\$0	\$0	0
Supported Employment Services		H2023		15 Minutes	23	669	\$61,592	\$2,678	\$92	29
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027	HF	Days	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Hour	0	0	\$0	\$0	\$0	0
Home Based Services		H2033		Per Diem	348	38,157	\$3,377,475	\$9,705	\$89	110
Substance Use Disorder: Recovery Housing		H2034		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035	HF	Per Service	0	0	\$0	\$0	\$0	0

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Statewide sun	ımary			Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Use Disorder: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036	HF	Per Mile	0	0	\$0	\$0	\$0	0
Telemedicine Facility Fee		Q3014	GT	Per Mile	1,473	5,091	\$268,984	\$183	\$53	3
Transportation		S0209		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Transportation		S0215	HF	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	2,418	15,500	\$2,602,693	\$1,076	\$168	6
Family Training		S5111	НА	Days	19	119	\$23,943	\$1,260	\$201	6
Family Training		S5111	НМ	Days	1,640	13,731	\$3,188,938	\$1,944	\$232	8
Foster Care		S5140		Per Diem	15	15	\$7,427	\$495	\$495	1
Foster Care		S5145		Encounter	12	1,554	\$352,090	\$29,341	\$227	130
Respite		S5150		Month	0	0	\$0	\$0	\$0	0
Respite		S5151		Service	22	356	\$58,640	\$2,665	\$165	16
Personal Emergency Response System (PERS)		S5160		Items	0	0	\$0	\$0	\$0	0
Personal Emergency Response System (PERS)		S5161		Encounter	2	10	\$16,484	\$8,242	\$1,648	5
Environmental Modification		S5165		Hour	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		S5199		Hour	2	2	\$3,820	\$1,910	\$1,910	1
Occupational or Physical Therapy		S8990		Hour	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 minutes	95	122	\$10,740	\$113	\$88	1
Health Services		S9446		Hour	0	0	\$0	\$0	\$0	0
Health Services		S9470		Hour	5	10	\$3,109	\$622	\$311	2
Prevention Services - Direct Model		S9482		Days	643	25,195	\$1,342,771	\$2,088	\$53	39
Intensive Crisis Stabilization-Enrolled Program		S9484		Days	14	21	\$5,863	\$419	\$279	2
Intensive Crisis Stabilization-Enrolled Program		S9484	TJ	Up to 15 min	8	12	\$9,566	\$1,196	\$797	2
Residential Room and Board		S9976		Up to 15 min	126	831	\$23,062	\$183	\$28	7
Substance Use Disorder: Residential Room and Board	d	S9976	HF	Up to 15 min	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Encounter	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TD	Up to 15 min	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000	TE	15 Minutes	0	0	\$0	\$0	\$0	0
Assessment		T1001		15 Minutes	744	799	\$146,687	\$197	\$184	1
Health Services		T1002		15 Minutes	858	2,185	\$128,128	\$149	\$59	3
Respite Care		T1005		15 minutes	1,406	666,693	\$2,895,685	\$2,060	\$4	474

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Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Respite Care		T1005	TD	Encounter	1	838	\$3,262	\$3,262	\$4	838
Respite Care		T1005	TE	Encounter	1	203	\$674	\$674	\$3	203
Respite Care (Children's Waiver & SED Waiver)		T1005	тт	Encounter	99	35,744	\$140,609	\$1,420	\$4	361
Substance Use Disorder: Treatment Planning		T1007	HF	Encounter	2	2	\$325	\$163	\$163	1
Substance Use Disorder: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Recovery Support Services		T1012		15 minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		15 minutes	8	81	\$9,804	\$1,225	\$121	10
Supports Coordination/Wrap Facilitation		T1016		Days	2,674	31,121	\$2,442,988	\$914	\$78	12
Targeted Case Management		T1017		Encounter	12,297	254,342	\$17,872,132	\$1,453	\$70	21
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	0	0	\$0	\$0	\$0	0
Personal Care in Licensed Specialized Residential Setting		T1020		Items	66	665	\$19,664	\$298	\$30	10
Assessments		T1023		Encounter	4,944	7,010	\$3,885,752	\$786	\$554	1
Prevention Services - Direct Model		T1027		Encounter	36	809	\$66,035	\$1,834	\$82	22
Enhanced Medical Supplies or Pharmacy		T1999		Per Diem	5	8	\$1,871	\$374	\$234	2
Transportation		T2001		Per Diem	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Transportation		T2001	HF	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2002		Encounter / Trip	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Transportation		T2002	HF	Encounter	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter	19	28	\$23,133	\$1,218	\$826	1
Substance Use Disorder: Transportation		T2003	HF	Encounter	0	0	\$0	\$0	\$0	0
Transportation		T2004		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Transportation		T2004	HF	Hour	0	0	\$0	\$0	\$0	0
Transportation		T2005		Month	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Transportation		T2005	HF		0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Month	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		T2024		Items	20	491	\$25,041	\$1,252	\$51	25
Fiscal Intermediary Services		T2025		Per session. One night = one session	272	1,633	\$129,335	\$475	\$79	6
Enhanced Medical Equipment-Supplies		T2028		Per session. One day/partial day = one session	3	5	\$3,444	\$1,148	\$689	2
Enhanced Medical Equipment-Supplies		T2029		Service	5	33	\$5,339	\$1,068	\$162	7
Respite Care		T2036		Items	235	1,365	\$169,843	\$723	\$124	6
Respite Care		T2037		Per Item	128	1,419	\$49,546	\$387	\$35	11

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Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Housing Assistance		T2038		Per Item	9	9	\$4,374	\$486	\$486	1
Enhanced Medical Equipment-Supplies		T2039			0	0	\$0	\$0	\$0	0
Goods and Services		T5999	HK		0	0	\$0	\$0	\$0	0
Wraparound Services		T5999			0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					2	0	\$240	\$120	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes		ALL			67	0	\$2,670	\$40	\$0	0
Total Population and Cost					60,723		\$261,634,690			

Persons with Developmental Disabilities

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Statewide Summary				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Local Psychiatric Hospital/IMD PT68 bundled per diem	0100		PT68	Days	338	5,575	\$4,573,703	\$13,532	\$820	16
Local Psychiatric Hospital/IMD PT68bundled per diem	0100		PT68	Days	104	1,300	\$306,413	\$2,946	\$236	12
Local Psychiatric Hospital/IMD PT68physician costs excluded	0114, 0124, 0134, 0154		PT68	Days	14	250	\$127,710	\$9,122	\$511	18
Local Psychiatric Hospital/IMD PT68physician costs excluded	0114, 0124, 0134, 0154		PT68	Days	3	77	\$3,398	\$1,133	\$44	26
Local Psychiatric Hospital - Acute Community PT73bundled per diem	0100		PT73	Days	326	4,448	\$3,529,587	\$10,827	\$794	14
Local Psychiatric Hospital - Acute Community PT73bundled per diem	0100		PT73	Days	57	626	\$103,408	\$1,814	\$165	11
Local Psychiatric Hospital - Acute Community PT73physician costs excluded	0114, 0124, 0134, 0154		PT73	Days	77	1,058	\$719,734	\$9,347	\$680	14
Local Psychiatric Hospital - Acute Community PT73physician costs excluded	0114, 0124, 0134, 0154		PT73	Days	15	165	\$11,971	\$798	\$73	11
Local Psychiatric Hospital/IMD			PT68	Amount	0	0	\$2,229	\$0	\$0	0
Local Psychiatric Hospital/Acute Community			PT73	Days	0	0	\$10,064	\$0	\$0	0
Inpatient Hospital Ancillary Services - Room and Board	0144			# of items	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Leave of Absence	0183			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0250-0254, 0257-0258			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Medical/Surgical Supplies and Devices	0270-0272				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Laboratory	0300-0302, 0305-0307			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Radiology	0320			# of treatments	0	0	\$0	\$0	\$0	0
ECT Anesthesia	0370			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Respiratory Services	0410			# of treatments	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -Physical Therapy	0420-0424			# of visits	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Occupational Therapy	0430-0434			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Speech-Language Pathology	0440-0444			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Emergency Room	0450			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pulmonary Function	0460			# of units	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Audiology	0470-0472				0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Magnetic Resonance Technology (MRT)	0610-0611			# of tests	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - Pharmacy	0636			# of tests	0	0	\$0	\$0	\$0	0
ECT Recovery Room	0710			Hour	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services -EKG/ECG	0730-0731			Encounter	0	0	\$0	\$0	\$0	0
Inpatient Hospital Ancillary Services - EEG	0740			# of visits	0	0	\$0	\$0	\$0	0
Crisis Observation Care	0762			Days	0	0	\$0	\$0	\$0	0

Persons with Developmental Disabilities

SUB-ELEMENT COST REPORT: Fiscal Year 2019

9,328

0

0

65

0

0

\$520,314

\$0

\$0

\$8,005

\$0

144

0

0

\$56

\$0

\$0

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Statewide Summary Unit Service Category Unit/Case Revenue Code HCPCS Code Modifier Cases Cost Cost/Case Cost/Unit Measure Units Additional Codes-ECT Facility Charge 0901 Days 2 20 \$19,450 \$9,725 \$972 10 0900, 0902-0904. Inpatient Hospital Ancillary Services -# of tests 0 0 \$0 \$0 \$0 Psychiatric/Psychological Treatments/Services 0911, 0914-0919 Outpatient Partial Hospitalization 0912 # of visits 167 1,519 \$435,952 \$2,610 \$287 9 Outpatient Partial Hospitalization 0913 \$0 Minutes 0 0 \$0 \$0 0 Inpatient Hospital Ancillary Services - Other Diagnosis Services 0 \$0 \$0 \$0 Ω 0 Minutes Inpatient Hospital Ancillary Services - Other Therapeutic 0940-0942 0 \$0 \$0 Encounter 0 \$0 0 Services Additional Codes-ECT Anesthesia 00104 First 30 Minutes 0 0 \$0 \$0 \$0 0 Additional Codes-ECT Anesthesia 0901 00104 15 Minutes 1 13 \$12,298 \$12,298 \$946 13 ABA Behavior Identification Assessment (Note: code retired 0359T U5 Each Additional 30 Minutes 1,883 1,913 \$888,849 \$465 12/31/18) ABA Behavioral Follow-up Assessment (reporting units of per U5 155 0362T First 30 Minutes 377 \$36,909 \$238 \$98 15 minutes effective 1/1/19) U5 Each Additional 30 Minutes ABA Behavioral Follow-up Assessment (reporting units of per 0362T \$38 126 1,160 \$44,432 \$353 15 minutes effective 1/1/19) ABA Behavioral Follow-up Assessment (Note: code retired 0363T U5 First 30 Minutes 87 346 \$25,260 \$290 \$73 12/31/18) ABA Adaptive Treatment(Note: code retired 12/31/18) 0364T U5 Each Additional 30 Minutes 4,276 148,741 \$4,442,238 \$1,039 \$30 35 U5 223 ABA Adaptive Treatment(Note: code retired 12/31/18) 0365T First 30 Minutes 4.298 956.875 \$27,726,664 \$6.451 \$29 U5 ABA Group Adaptive Behavior Treatment(Note: code 0366T Each Additional 30 Minutes 118 2,359 \$99,868 \$846 \$42 20 retired 12/31/18) U5 ABA Group Adaptive Behavior Treatment(Note: code 0367T Encounter 81 1.592 \$53,268 \$658 \$33 20 retired 12/31/18) ABA Clinical Observation and Direction of Adaptive Behavior 0368T U5 4,017 41,906 \$2,709,307 \$674 \$65 10 Encounter Treatment(Note: code retired 12/31/18) U5 ABA Clinical Observation and Direction of Adaptive Behavior 0369T Encounter 3,997 97,943 \$6,220,584 \$1,556 \$64 25 Treatment(Note: code retired 12/31/18) ABA Family Behavior Treatment Guidance(Note: code 0370T U5 First 60 Minutes 2,760 7,906 \$965,350 \$350 \$122 retired 12/31/18) ABA Family Behavior Treatment Guidance(Note: code U5 0371T Per 15 Minutes 33 97 \$7,079 \$215 \$73 retired 12/31/18) ABA Adaptive Behavior Treatment Social Skills 0372T U5 Each Additional 30 Minutes 20 90 \$5,349 \$267 \$59 Group(Note: code retired 12/31/18) ABA Exposure Adaptive Behavior Treatment (reporting units 0373T U5 84 41,106 \$1,271,788 \$15,140 \$31 489 Encounter changed effective 1/1/19 - see new line below) ABA Exposure Adaptive Behavior Treatment (reporting units 0373T U5 73 65,268 \$1,881,145 \$25,769 \$29 894 Encounter

Encounter

Encounter

Encounter

0374T

80305

80306

U5

ABA Exposure Adaptive Behavior Treatment(Note: code

of per 15 minutes effective 1/1/19)

retired 12/31/18)

Drug Screen

Drug Screen

Persons with Developmental Disabilities

SUB-ELEMENT COST REPORT: Fiscal Year 2019

Statewide Summary Service Category	Revenue Code	HCPCS Code	Modifier	Unit Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Drug Screen		80307		Encounter	0	0	\$0	\$0	\$0	(
Interactive Complexity - Add On Code		90785		Encounter	172	592	\$47,627	\$277	\$80	3
Assessment for Autism		90785	U5	Encounter	0	0	\$0	\$0	\$0	0
Substance Abuse - Interactive Complexity - Add On Code		90785	HF	Encounter	0	0	\$0	\$0	\$0	0
Assessment		90791		Encounter	827	859	\$389,924	\$471	\$454	1
Substance Use: Assessment		90791	HF	Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism		90791	U5	Encounter	2	2	\$699	\$349	\$349	1
Assessment		90792		30 Minutes	2,511	2,570	\$1,004,166	\$400	\$391	1
Substance Use: Assessment		90792	HF	30 Minutes	0	0	\$0	\$0	\$0	0
Assessment for Autism		90792	U5	30 Minutes	1	1	\$669	\$669	\$669	1
Mental Health: Outpatient Care	·	90832		45 Minutes	2,282	8,437	\$664,006	\$291	\$79	4
Substance Use Disorder: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90832	HF	45 Minutes	15	34	\$3,470	\$231	\$102	2
Assessment		90833		45 Minutes	3	4	\$677	\$226	\$169	1
Mental Health: Outpatient Care		90834		60 Minutes	3,496	18,121	\$2,394,752	\$685	\$132	5
Substance Use Disorder: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	90834	HF	60 Minutes	19	39	\$6,683	\$352	\$171	2
Assessment		90836		60 Minutes	3	4	\$1,441	\$480	\$360	1
Mental Health: Outpatient Care		90837		First 30-74 Min.	2,904	15,724	\$2,793,888	\$962	\$178	5
Substance Use Disorder: Outpatient Care		90837	HF	Each Additional 30 Minutes	11	38	\$7,306	\$664	\$192	3
Assessment		90838		Encounter	3	4	\$1,471	\$490	\$368	1
Psychotherapy for Crisis First 60 Minutes		90839		Encounter	64	106	\$18,058	\$282	\$170	2
Psychotherapy for Crisis Each Additional 30 Minutes		90840		Encounter	10	29	\$2,405	\$240	\$83	3
Therapy-Family Therapy		90846		Encounter	517	1,305	\$236,596	\$458	\$181	3
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90846	HF	Encounter	0	0	\$0	\$0	\$0	0
Therapy-Family Therapy		90847		Encounter	1,426	7,270	\$1,058,200	\$742	\$146	5
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90847	HF	Encounter	3	3	\$398	\$133	\$133	1
Therapy-Family Therapy		90849		Encounter	26	88	\$17,588	\$676	\$200	3
Therapy-Family Therapy		90849	HS	Encounter	20	115	\$53,365	\$2,668	\$464	6
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90849	HF		0	0	\$0	\$0	\$0	0
Therapy-Group Therapy		90853		Encounter	648	5,660	\$616,564	\$951	\$109	9
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	90853	HF	Encounter	11	94	\$8,557	\$778	\$91	9
Additional Codes-ECT Physician		90870		Encounter	5	95	\$66,881	\$13,376	\$704	19

Persons with Developmental Disabilities

SUB-ELEMENT COST REPORT: Fiscal Year 2019

Statewide Summ	mary			Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Additional Codes-ECT Physician	0901	90870		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		90887		Encounter	248	261	\$25,272	\$102	\$97	1
Speech & Language Therapy		92507		Encounter	1,968	54,808	\$4,806,260	\$2,442	\$88	28
Speech & Language Therapy		92508		Encounter	33	118	\$11,514	\$349	\$98	4
Speech & Language Therapy		92521		Encounter	5	5	\$776	\$155	\$155	1
Speech & Language Therapy		92522		Encounter	41	43	\$9,060	\$221	\$211	1
Speech & Language Therapy		92523		First Hour	1,543	1,692	\$264,371	\$171	\$156	1
Speech & Language Therapy		92524		Each Additional 30 Minutes	12	123	\$10,877	\$906	\$88	10
Speech & Language Therapy		92526		Encounter	115	724	\$58,510	\$509	\$81	6
Speech & Language Therapy		92607		Encounter	4	5	\$525	\$131	\$105	1
Speech & Language Therapy		92608		First Hour	2	25	\$804	\$402	\$32	13
Speech & Language Therapy		92609		Each Additional 15 Minutes	29	493	\$45,767	\$1,578	\$93	17
Speech & Language Therapy		92610		Encounter	254	261	\$45,183	\$178	\$173	1
Evaluation of Auditory Rehabilitation Status (Children's Waiver)	's	92626		Encounter	0	0	\$0	\$0	\$0	0
Evaluation of Auditory Rehabilitation Status (Children's Waiver)	i's	92627		Per Hour	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation Preling Hearing Loss (Children Waiver)	n's	92630		Hour	0	0	\$0	\$0	\$0	0
Auditory Rehabilitation; Post-Lingual Hearing Loss (Cl Waiver)	Children's	92633		Per Hour	0	0	\$0	\$0	\$0	0
Assessments - Testing(Note: code retired 12/31/18)		96101		Hour	396	1,254	\$240,323	\$607	\$192	3
Assessment for Autism(Note: code retired 12/31/18)		96101	U5	Per Hour	291	773	\$159,336	\$548	\$206	3
Assessments - Testing(Note: code retired 12/31/18)		96102		Encounter	0	0	\$0	\$0	\$0	0
Assessment for Autism(Note: code retired 12/31/18)		96102	U5	Encounter	0	0	\$0	\$0	\$0	0
Assessments - Testing(Note: code retired 12/31/18)		96103		Encounter	0	0	\$0	\$0	\$0	0
Assessments-Other		96105		First Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96110		Each Additional 30 Minutes	75	80	\$26,425	\$352	\$330	1
Assessments - Other(Note: code retired 12/31/18)		96111		Per Hour	84	145	\$19,270	\$229	\$133	2
Assessments - Testing		96112		Per Hour	75	75	\$46,326	\$618	\$618	1
Assessments - Testing		96113		Hour	3	3	\$949	\$316	\$316	1
Neurobehavioral Status Exam		96116		Per Hour	2	2	\$90	\$45	\$45	1
Assessments - Testing(Note: code retired 12/31/18)		96118		Hour	17	14	\$2,528	\$149	\$181	1
Assessment for Autism(Note: code retired 12/31/18)		96118	U5	Per Hour	52	209	\$27,718	\$533	\$133	4
Assessments - Testing(Note: code retired 12/31/18)		96119		Each Additional Hour	0	0	\$0	\$0	\$0	0
Assessment for Autism(Note: code retired 12/31/18)		96119	U5		0	0	\$0	\$0	\$0	0

Persons with Developmental Disabilities

SUB-ELEMENT COST REPORT: Fiscal Year 2019

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Statewide Summary				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Assessments - Testing(Note: code retired 12/31/18)		96120		First Hour	0	0	\$0	\$0	\$0	0
Assessments - Testing		96121		First Hour	0	0	\$0	\$0	\$0	0
Assessments-Other		96127		Each Additional Hour	0	0	\$0	\$0	\$0	0
Assessments - Testing		96130		Each Additional Hour	977	1,132	\$242,887	\$249	\$215	1
Assessment for Autism		96130	U5	First Hour	785	829	\$181,782	\$232	\$219	1
Assessments - Testing		96131		First Hour	764	1,288	\$203,813	\$267	\$158	2
Assessment for Autism		96131	U5	Each Additional Hour	367	619	\$124,932	\$340	\$202	2
Assessments - Testing		96132		Each Additional Hour	28	29	\$3,280	\$117	\$113	1
Assessment for Autism		96132	U5	First 30 Minutes	165	165	\$20,839	\$126	\$126	1
Assessments - Testing		96133		First 30 Minutes	40	52	\$5,004	\$125	\$96	1
Assessment for Autism		96133	U5	Each Additional 30 Minutes	158	349	\$45,082	\$285	\$129	2
Assessments - Testing		96136		Each Additional 30 Minutes	455	459	\$50,142	\$110	\$109	1
Assessment for Autism		96136	U5	First 30 Minutes	551	595	\$39,850	\$72	\$67	1
Assessments - Testing		96137		Each Additional 30 Minutes	458	1,560	\$150,511	\$329	\$96	3
Assessment for Autism		96137	U5	Encounter	563	1,899	\$136,861	\$243	\$72	3
Assessments - Testing		96138		Encounter	0	0	\$0	\$0	\$0	0
Assessments - Testing		96139		15 Minutes	0	0	\$0	\$0	\$0	0
Assessments - Testing		96146		15 Minutes	0	0	\$0	\$0	\$0	0
Medication Administration		96372		15 Minutes	946	8,328	\$799,660	\$845	\$96	9
Occupational or Physical Therapy		97110		15 Minutes	1,574	87,012	\$2,310,699	\$1,468	\$27	55
Occupational or Physical Therapy		97112		15 Minutes	165	5,249	\$205,323	\$1,244	\$39	32
Occupational or Physical Therapy		97113		15 Minutes	0	0	\$0	\$0	\$0	0
Occupational or Physical Therapy		97116		Encounter	40	878	\$62,658	\$1,566	\$71	22
Occupational or Physical Therapy		97124		15 Minutes	36	1,810	\$52,757	\$1,465	\$29	50
Occupational or Physical Therapy		97140		15 Minutes	86	3,842	\$153,467	\$1,784	\$40	45
Occupational or Physical Therapy		97150		15 Minutes	5	16	\$3,902	\$780	\$244	3
ABA Behavior Identification Assessment (new code effective 1/1/19)		97151	U5	15 Minutes	4,731	46,473	\$1,760,160	\$372	\$38	10
ABA Adaptive Behavior Treatment (new code effective 1/1/19)		97153	U5	15 Minutes	6,764	8,000,288	\$111,060,020	\$16,419	\$14	1,183
ABA Group Adaptive Behavior Treatment(new code effective 1/1/19)		97154	U5	15 Minutes	260	48,209	\$555,424	\$2,136	\$12	185
ABA Clinical Observation and Direction of Adaptive Behavior Treatment(new code effective 1/1/19)		97155	U5	15 Minutes	5,936	1,021,512	\$30,805,777	\$5,190	\$30	172
ABA Family Behavior Treatment Guidance(new code effective 1/1/19)		97156	U5	Encounter	4,730	94,880	\$2,844,388	\$601	\$30	20
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Persons with Developmental Disabilities

SUB-ELEMENT COST REPORT: Fiscal Year 2019

Statewide Summary				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
ABA Family Behavior Treatment Guidance(new code effective 1/1/19)		97157	U5	Encounter	85	1,317	\$20,525	\$241	\$16	15
ABA Adaptive Behavior Treatment Social Skills Group(new code effective 1/1/19)		97158	U5	Encounter	41	2,669	\$41,862	\$1,021	\$16	65
Physical Therapy		97161		Encounter	88	91	\$13,385	\$152	\$147	1
Physical Therapy		97162		Encounter	139	142	\$30,414	\$219	\$214	1
Physical Therapy		97163		Encounter	212	214	\$76,795	\$362	\$359	1
Physical Therapy		97164		Encounter	48	49	\$8,530	\$178	\$174	1
Occupational Therapy		97165		Encounter	629	643	\$178,014	\$283	\$277	1
Occupational Therapy		97166		15 Minutes	1,388	1,425	\$318,410	\$229	\$223	1
Occupational Therapy		97167		15 Minutes	500	514	\$175,508	\$351	\$341	1
Occupational Therapy		97168		15 Minutes	726	824	\$167,529	\$231	\$203	1
Occupational or Physical Therapy		97530		15 Minutes	1,425	105,013	\$3,584,996	\$2,516	\$34	74
Occupational or Physical Therapy		97533		15 Minutes	322	15,153	\$710,228	\$2,206	\$47	47
Occupational or Physical Therapy		97535		15 Minutes	332	4,194	\$279,292	\$841	\$67	13
Occupational or Physical Therapy		97537		15 Minutes	2	4	\$172	\$86	\$43	2
Occupational or Physical Therapy		97542		15 Minutes	189	934	\$87,882	\$465	\$94	5
Occupational or Physical Therapy		97750		15 Minutes	14	27	\$1,393	\$100	\$52	2
Occupational Therapy		97755		15 Minutes	45	151	\$17,623	\$392	\$117	3
Occupational or Physical Therapy		97760		15 Minutes	2	11	\$1,357	\$679	\$123	6
Prosthetic Training (Children's Waiver)		97761		15 Minutes	1	3	\$210	\$210	\$70	3
Occupational or Physical Therapy		97763		30 Minutes	1	4	\$158	\$158	\$40	4
Assessment or Health Services		97802		Encounter	471	1,517	\$119,091	\$253	\$79	3
Assessment or Health Services		97803		Encounter	508	2,081	\$116,139	\$229	\$56	4
Health Services		97804		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Acupuncture		97810		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Acupuncture		97811		Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99201		Encounter	7	7	\$2,573	\$368	\$368	1
Substance Use Disorder: New Patient Evaluation and Management		99201	HF	Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99202		Encounter	29	59	\$12,682	\$437	\$215	2
Substance Use Disorder: New Patient Evaluation and Management	-	99202	HF	Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99203		Encounter	100	124	\$63,743	\$637	\$514	1
Substance Use Disorder: New Patient Evaluation and Management		99203	HF	Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management	·	99204	-	Encounter	66	66	\$35,203	\$533	\$533	1

Persons with Developmental Disabilities

SUB-ELEMENT COST REPORT: Fiscal Year 2019

Statewide Summary				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Use Disorder: New Patient Evaluation and Management		99204	HF	Encounter	0	0	\$0	\$0	\$0	0
New Patient Evaluation and Management		99205		Encounter	150	151	\$122,297	\$815	\$810	1
Substance Use Disorder: New Patient Evaluation and Management		99205	HF	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99211		Encounter	477	831	\$127,113	\$266	\$153	2
Substance Use Disorder: Established Patient Evaluation and Management		99211	HF	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99212		Encounter	3,050	7,643	\$828,448	\$272	\$108	3
Substance Use Disorder: Established Patient Evaluation and Management		99212	HF	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99213		Encounter	8,994	25,111	\$4,088,009	\$455	\$163	3
Sustance Abuse: Established Patient Evaluation and Management		99213	HF	Encounter	0	0	\$0	\$0	\$0	0
Established Patient Evaluation and Management		99214		Encounter	7,641	21,942	\$4,984,329	\$652	\$227	3
Substance Use Disorder: Established Patient Evaluation and Management		99214	HF	30 Minutes	1	1	\$151	\$151	\$151	1
Established Patient Evaluation and Management		99215		50 Minutes	1,242	2,231	\$652,457	\$525	\$292	2
Substance Use Disorder: Established Patient Evaluation and Management		99215	HF	70 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99221		15 Minutes	23	25	\$2,374	\$103	\$95	1
Additional Codes-Physician Services		99222		25 minutes	21	22	\$2,047	\$97	\$93	1
Additional Codes-Physician Services		99223		35 Minutes	16	21	\$2,150	\$134	\$102	1
Additional Codes-Physician Services		99224		15 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99225		25 minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99226		35 Minutes	0	0	\$0	\$0	\$0	0
Additional Codes-Physician Services		99231		<= 30 Minutes	60	316	\$24,043	\$401	\$76	5
Additional Codes-Physician Services		99232		> 30 Minutes	52	268	\$22,388	\$431	\$84	5
Additional Codes-Physician Services		99233		15 Minutes	33	112	\$9,151	\$277	\$82	3
Additional Codes-Physician Services		99238		30 Minutes	13	13	\$921	\$71	\$71	1
Additional Codes-Physician Services		99239		40 Minutes	28	32	\$2,602	\$93	\$81	1
Substance Use Disorder: Physician Consultations		99241	HF	60 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99242	HF	80 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99243	HF	20 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations	·	99244	HF	40 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99245	HF	55 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations	-	99251	HF	80 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations		99252	HF	110 Minutes	0	0	\$0	\$0	\$0	0

Persons with Developmental Disabilities

SUB-ELEMENT COST REPORT: Fiscal Year 2019

Statewide Summary			Unit						
Service Category Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Use Disorder: Physician Consultations	99253	HF	25 minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations	99254	HF	35 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Physician Consultations	99255	HF	45 Minutes	0	0	\$0	\$0	\$0	0
Nursing Facility Services evaluation and management	99304		10 Minutes	0	0	\$0	\$0	\$0	0
Nursing Facility Services evaluation and management	99305		15 Minutes	1	1	\$137	\$137	\$137	1
Nursing Facility Services evaluation and management	99306		25 minutes	2	2	\$0	\$0	\$0	1
Nursing Facility Services evaluation and management	99307		35 Minutes	6	7	\$277	\$46	\$40	1
Nursing Facility Services evaluation and management	99308		Encounter	22	41	\$1,593	\$72	\$39	2
Nursing Facility Services evaluation and management	99309		Encounter	41	70	\$4,371	\$107	\$62	2
Nursing Facility Services evaluation and management	99310		Encounter	8	9	\$884	\$111	\$98	1
Assessment	99324		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99325		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99326		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99327		Encounter	1	1	\$232	\$232	\$232	1
Assessment	99328		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99334		Encounter	27	61	\$7,083	\$262	\$116	2
Assessment	99335		Encounter	10	23	\$3,832	\$383	\$167	2
Assessment	99336		Encounter	5	11	\$3,480	\$696	\$316	2
Assessment	99337		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99341		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99342		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99343		Encounter	1	1	\$1,139	\$1,139	\$1,139	1
Assessment	99344		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99345		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99347		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99348		Encounter	0	0	\$0	\$0	\$0	0
Assessment	99349		15 Minutes	2	4	\$709	\$354	\$177	2
Assessment	99350		Per mile	0	0	\$0	\$0	\$0	0
Medication Administration	99506		Per mile	6	30	\$1,171	\$195	\$39	5
Medication Management	99605		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation	A0080		Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation	A0090		Per one-way trip	5	12,289	\$6,903	\$1,381	\$1	2,458
Transportation	A0100		Per one-way trip	1	1	\$305	\$305	\$305	1
Substance Use Disorder: Transportation	A0100	HF	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation	A0110		Per one-way trip	0	0	\$0	\$0	\$0	0

Persons with Developmental Disabilities

SUB-ELEMENT COST REPORT: Fiscal Year 2019

Statewide Summary				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Use Disorder: Transportation		A0110	HF	Per one-way trip	0	0	\$0	\$0	\$0	0
Transportation		A0120			508	13,668	\$540,901	\$1,065	\$40	27
Transportation		A0130		Per Mile	3	278	\$11,104	\$3,701	\$40	93
Transportation		A0140		Refer to code descriptions.	0	0	\$0	\$0	\$0	0
Transportation		A0170		Items	1	12	\$3,515	\$3,515	\$293	12
Additional Codes-Transportation		A0425		Encounter	0	0	\$0	\$0	\$0	0
Additional Codes-Transportation		A0427		Encounter Session at least 45 min	0	0	\$0	\$0	\$0	0
Enhanced Medical Equipment-Supplies		E1399		15 Minutes	269	510	\$334,198	\$1,242	\$655	2
Activity Therapy (Children's Waiver)		G0176		15 Minutes	161	5,012	\$347,738	\$2,160	\$69	31
Family Training/Support EBP only		G0177		Encounter	1	5	\$477	\$477	\$95	5
Substance Use Disorder: Recovery Support Services		G0409		Encounter	0	0	\$0	\$0	\$0	0
Occupational Therapy		G0515		Encounter	5	53	\$6,967	\$1,393	\$131	11
Substance Use Disorder: Individual Assessment		H0001		15 Minutes	28	29	\$6,926	\$247	\$239	1
Assessment		H0002		Encounter	1,335	1,806	\$391,194	\$293	\$217	1
Substance Use Disorder: Laboratory		H0003		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0004		Days	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0005		Days	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Case Management		H0006		Days	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Sub-Acute Detoxification	1002	H0010		Days	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Sub-Acute Detoxification	1002	H0012		Days	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Sub-Acute Detoxification	1002	H0014		Days	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Outpatient Care	0906	H0015		Days	1	21	\$3,477	\$3,477	\$166	21
Crisis Residential Services		H0018		Encounter	195	1,539	\$698,593	\$3,583	\$454	8
Substance Use Disorder: Residential	1002	H0018	HF	Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Residential	1002	H0019	HF	Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Methadone		H0020		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Early Intervention		H0022		Face to Face Contact	1	1	\$49	\$49	\$49	1
Peer Directed and Operated Support Services		H0023		Encounter	73	4,055	\$252,608	\$3,460	\$62	56
Substance Use Disorder: Recovery Support Services		H0023	HF	Encounter	0	0	\$0	\$0	\$0	0
Prevention Services - Direct Model		H0025			32	300	\$64,988	\$2,031	\$217	9
Assessment		H0031		Encounter	17,567	19,687	\$5,955,748	\$339	\$303	1
Assessment for Autism		H0031	U5	Encounter	4,714	5,450	\$5,424,715	\$1,151	\$995	1

Persons with Developmental Disabilities

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Statewide Summary				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Support Intensity Scale (SIS) Face-to-Face Assessment		H0031	HW	Direct Observation Encounter	6,709	6,738	\$3,760,557	\$561	\$558	1
Treatment Planning		H0032		15 Minutes	11,759	30,401	\$6,386,217	\$543	\$210	3
Monitoring of Treatment - Clinician		H0032	TS	15 Minutes	6,065	27,167	\$5,831,757	\$962	\$215	4
Substance Use Disorder: Pharmalogical Support - Suboxane		H0033		15 Minutes	0	0	\$0	\$0	\$0	0
Health Services		H0034		15 minutes	60	221	\$52,176	\$870	\$236	4
Home Based Services		H0036		15 Minutes	616	51,547	\$3,267,197	\$5,304	\$63	84
Home Based Services		H0036	ST	15 Minutes	7	287	\$29,564	\$4,223	\$103	41
Peer Directed and Operated Support Services		H0038			653	32,785	\$1,032,688	\$1,581	\$31	50
Peer Directed and Operated Support Services		H0038	TJ	15 Minutes	9	904	\$17,048	\$1,894	\$19	100
Substance Use Disorder: Recovery Support Services		H0038	HF	15 Minutes	12	1,598	\$29,342	\$2,445	\$18	133
Peer Directed and Operated Support Services		NA		Per Diem	87	119	\$17,841	\$205	\$150	1
Assertive Community Treatment (ACT)		H0039		Per Diem	155	21,076	\$1,573,757	\$10,153	\$75	136
Assertive Community Treatment (ACT)		H0039	TG	Per Diem	17	1,629	\$38,282	\$2,252	\$24	96
Community Living Supports in Independent living/own home		H0043		Per Diem	1,685	285,602	\$64,213,419	\$38,109	\$225	169
Community Living Supports in Independent living/own home		H0043	TF	Per Diem	1,498	293,911	\$39,838,177	\$26,594	\$136	196
Community Living Supports in Independent living/own home		H0043	TG	Per Diem	1,315	261,605	\$61,894,826	\$47,068	\$237	199
Community Living Supports in Independent living/own home		H0043	TT	Days	130	29,537	\$5,660,607	\$43,543	\$192	227
Community Living Supports in Independent living/own home		H0043	TF/TT	Encounter	265	51,315	\$7,044,348	\$26,582	\$137	194
Community Living Supports in Independent living/own home		H0043	TG/TT	Encounter	1,281	375,609	\$65,203,155	\$50,900	\$174	293
Respite		H0045		15 Minutes	953	10,665	\$2,013,805	\$2,113	\$189	11
Peer Directed and Operated Support Services		H0046		Encounter	242	3,308	\$211,476	\$874	\$64	14
Substance Use Disorder: Laboratory		H0048		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Outpatient Treatment	0900, 0906, 0914, 0915, 0916, 0919	H0050		15 minutes	2	9	\$304	\$152	\$34	5
Behavior Treatment Plan Review		H2000		15 Minutes	1,860	5,756	\$902,199	\$485	\$157	3
Behavior Treatment Plan Review - Monitoring Activities		H2000	TS	15 Minutes	1,561	7,806	\$1,778,043	\$1,139	\$228	5
Comprehensive Medication Services - EBP only		H2010		15 Minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011		15 Minutes	982	5,921	\$673,298	\$686	\$114	6
Crisis Intervention		H2011	НВ	15 Minutes	11	44	\$7,751	\$705	\$176	4
Crisis Intervention		H2011	HC	15 minutes	1	3	\$166	\$166	\$55	3
Substance Use Disorder: Crisis Intervention, per 15 minutes		H2011	HF	15 Minutes	0	0	\$0	\$0	\$0	0
Crisis Intervention		H2011	TJ	15 Minutes	212	1,547	\$370,860	\$1,749	\$240	7
Skill-Building and Out of Home Non Vocational Habilitation		H2014		15 Minutes	11,383	20,737,601	\$81,019,650	\$7,118	\$4	1,822
Out of Home Non Vocational Habilitation		H2014	HK	Per Diem	2,503	6,998,857	\$30,221,923	\$12,074	\$4	2,796

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Statewide Summary				Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Community Living Supports (15 Minutes)		H2015		15 Minutes	19,402	33,385,396	\$159,193,379	\$8,205	\$5	1,721
Community Living Supports (15 Minutes)		H2015	TT	15 Minutes	4,723	8,570,012	\$41,129,297	\$8,708	\$5	1,815
Community Living Supports (Daily)		H2016		15 Minutes	8,570	2,527,932	\$348,369,538	\$40,650	\$138	295
Behavior Services		H2019		Days	46	2,355	\$92,544	\$2,012	\$39	51
Behavior Services		H2019	TT	Days	92	2,671	\$97,857	\$1,064	\$37	29
Wraparound		H2021		15 minutes	131	8,298	\$815,773	\$6,227	\$98	63
Supported Employment Services		H2023		15 Minutes	4,285	3,328,436	\$21,944,294	\$5,121	\$7	777
Mental Health Therapy		H2027		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Outpatient Care	0900, 0914, 0915, 0916, 0919	H2027	HF	Days	0	0	\$0	\$0	\$0	0
Clubhouse Psychosocial Rehabilitation Programs		H2030		Hour	332	473,695	\$2,950,424	\$8,887	\$6	1,427
Home Based Services		H2033		Per Diem	5	475	\$38,114	\$7,623	\$80	95
Substance Use Disorder: Recovery Housing		H2034		15 Minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2035	HF	Per Service	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Outpatient Care	0900, 0906, 0914, 0915, 0916, 0919	H2036	HF	Per Mile	0	0	\$0	\$0	\$0	0
Repair/Svc DME Non-Oxygen Equipment (Children's Waiver)		K0739		Per Mile	0	0	\$0	\$0	\$0	0
Telemedicine Facility Fee		Q3014	GT	Per Mile	1,082	3,978	\$178,179	\$165	\$45	4
Transportation		S0209		15 Minutes	0	0	\$0	\$0	\$0	0
Transportation		S0215		Encounter	1	198	\$133	\$133	\$1	198
Substance Use Disorder: Transportation		S0215	HF	Encounter	0	0	\$0	\$0	\$0	0
Family Training - EBP		S5110		Encounter	0	0	\$0	\$0	\$0	0
Family Training		S5111		Encounter	2,369	19,281	\$2,149,376	\$907	\$111	8
Family Training		S5111	HA	Days	9	58	\$11,254	\$1,250	\$194	6
Family Training		S5111	НМ	Days	510	4,581	\$922,721	\$1,809	\$201	9
Home Care Training, Non-Family (Children's Waiver)		S5116		15 Minutes	172	345	\$125,475	\$730	\$364	2
Foster Care		S5140		Per Diem	1	153	\$9,630	\$9,630	\$63	153
Foster Care		S5145		Encounter	2	670	\$211,050	\$105,525	\$315	335
Respite		S5150		Month	0	0	\$0	\$0	\$0	0
Respite		S5151		Service	655	8,635	\$915,922	\$1,398	\$106	13
Personal Emergency Response System (PERS)		S5160		Items	21	22	\$13,237	\$630	\$602	1
Personal Emergency Response System (PERS)		S5161		Encounter	242	2,509	\$3,300,524	\$13,639	\$1,315	10
Environmental Modification		S5165		Hour	88	98	\$724,810	\$8,236	\$7,396	1
Enhanced Medical Equipment-Supplies		S5199		Hour	108	209	\$69,534	\$644	\$333	2
Occupational or Physical Therapy		S8990		Hour	8	275	\$30,324	\$3,791	\$110	34

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Statewide Summ	nary			Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Private Duty Nursing	0582	S9123		Hour	16	26,091	\$1,109,456	\$69,341	\$43	1,631
Private Duty Nursing		S9123		Hour	10	11,511	\$435,832	\$43,583	\$38	1,151
Private Duty Nursing		S9123	TT	Hour	1	549	\$24,904	\$24,904	\$45	549
Private Duty Nursing	0582	S9124		Encounter	12	15,887	\$561,987	\$46,832	\$35	1,324
Private Duty Nursing		S9124		Encounter	11	25,850	\$858,623	\$78,057	\$33	2,350
Private Duty Nursing		S9124	TT	Encounter	0	0	\$0	\$0	\$0	0
Health Services		S9445		15 minutes	1,467	2,947	\$238,705	\$163	\$81	2
Health Services		S9446		Hour	60	670	\$301,352	\$5,023	\$450	11
Health Services		S9470		Hour	222	1,109	\$525,987	\$2,369	\$474	5
Prevention Services - Direct Model		S9482		Days	60	1,911	\$124,835	\$2,081	\$65	32
Intensive Crisis Stabilization-Enrolled Program		S9484		Days	18	248	\$46,218	\$2,568	\$186	14
Intensive Crisis Stabilization-Enrolled Program		S9484	TJ	Up to 15 min	0	0	\$0	\$0	\$0	0
Residential Room and Board		S9976		Up to 15 min	107	19,308	\$59,116	\$552	\$3	180
Substance Use Disorder: Residential Room and Board		S9976	HF	Up to 15 min	0	0	\$0	\$0	\$0	0
Private Duty Nursing		T1000		Encounter	40	283,325	\$2,437,049	\$60,926	\$9	7,083
Private Duty Nursing		T1000	TD	Up to 15 min	24	128,017	\$1,344,111	\$56,005	\$10	5,334
Private Duty Nursing		T1000	TE	15 Minutes	28	204,956	\$2,022,813	\$72,243	\$10	7,320
Assessment		T1001		15 Minutes	3,211	3,406	\$1,066,188	\$332	\$313	1
Health Services		T1002		15 Minutes	2,912	25,764	\$3,276,303	\$1,125	\$127	9
Respite Care		T1005		15 minutes	8,766	6,908,924	\$27,136,716	\$3,096	\$4	788
Respite Care		T1005	TD	Encounter	25	38,686	\$400,338	\$16,014	\$10	1,547
Respite Care		T1005	TE	Encounter	73	142,534	\$1,160,580	\$15,898	\$8	1,953
Respite Care (Children's Waiver & SED Waiver)		T1005	TT	Encounter	236	127,042	\$390,307	\$1,654	\$3	538
Substance Use Disorder: Treatment Planning		T1007	HF	Encounter	14	16	\$2,167	\$155	\$135	1
Substance Use Disorder: Child Sitting Services		T1009		15 minutes	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Recovery Support Services		T1012		15 minutes	0	0	\$0	\$0	\$0	0
Family Psycho-Education - EBP		T1015		15 minutes	508	8,239	\$985,544	\$1,940	\$120	16
Supports Coordination/Wrap Facilitation		T1016		Days	39,323	1,172,528	\$107,239,552	\$2,727	\$91	30
Targeted Case Management		T1017		Encounter	11,937	271,613	\$23,540,285	\$1,972	\$87	23
Nursing Home Mental Health Monitoring		T1017	SE	15 Minutes	396	32,034	\$2,206,645	\$5,572	\$69	81
Personal Care in Licensed Specialized Residential Settin	ng	T1020		Items	8,300	2,444,479	\$153,312,678	\$18,471	\$63	295
Assessments		T1023		Encounter	1,108	2,264	\$1,083,172	\$978	\$478	2
Prevention Services - Direct Model		T1027		Encounter	7	171	\$11,494	\$1,642	\$67	24
Enhanced Medical Supplies or Pharmacy		T1999		Per Diem	1,123	16,707	\$670,897	\$597	\$40	15
Transportation		T2001		Per Diem	2	391	\$3,673	\$1,836	\$9	196

Persons with Developmental Disabilities

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70,753

\$1,565,417,635

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Statewide Summar	•			Unit						
Service Category	Revenue Code	HCPCS Code	Modifier	Measure	Cases	Units	Cost	Cost/Case	Cost/Unit	Unit/Case
Substance Use Disorder: Transportation		T2001	HF	Encounter / Trip	0	0	\$0	\$0	\$0	0
Transportation		T2002		Encounter / Trip	5	377	\$10,422	\$2,084	\$28	75
Substance Use Disorder: Transportation		T2002	HF	Encounter	0	0	\$0	\$0	\$0	0
Transportation		T2003		Encounter	145	26,561	\$178,901	\$1,234	\$7	183
Substance Use Disorder: Transportation		T2003	HF	Encounter	0	0	\$0	\$0	\$0	0
Transportation		T2004		Encounter	0	0	\$0	\$0	\$0	0
Substance Use Disorder: Transportation		T2004	HF	Hour	0	0	\$0	\$0	\$0	0
Transportation		T2005		Month	1	128	\$9,171	\$9,171	\$72	128
Substance Use Disorder: Transportation		T2005	HF		0	0	\$0	\$0	\$0	0
Out of Home Prevocational Service		T2015		Month	64	32,535	\$730,593	\$11,416	\$22	508
Targeted Case Management (Children's Waiver)		T2023		Items	342	3,043	\$1,086,992	\$3,178	\$357	9
Prevention Services - Direct Model		T2024		Items	0	0	\$0	\$0	\$0	0
Fiscal Intermediary Services		T2025		Per session. One night = one session	9,010	84,856	\$8,496,928	\$943	\$100	9
Enhanced Medical Equipment-Supplies		T2028		Per session. One day/partial day = one session	56	233	\$45,777	\$817	\$196	4
Enhanced Medical Equipment-Supplies		T2029		Service	149	473	\$107,913	\$724	\$228	3
Respite Care		T2036		Items	671	5,067	\$658,500	\$981	\$130	8
Respite Care		T2037		Per Item	231	3,057	\$143,198	\$620	\$47	13
Housing Assistance		T2038		Per Item	23	25	\$16,354	\$711	\$654	1
Enhanced Medical Equipment-Supplies		T2039			18	23	\$193,209	\$10,734	\$8,400	1
Goods and Services		T5999	HK		0	0	\$0	\$0	\$0	0
Wraparound Services		T5999			0	0	\$0	\$0	\$0	0
Pharmacy (Drugs and Other Biologicals)					0	0	\$0	\$0	\$0	0
Other					0	0	\$0	\$0	\$0	0
Aggregate for 'J' Codes	·	ALL		<u> </u>	9	0	\$0	\$0	\$0	0

Total Population and Cost